



Intellectual Property Waiver

Date of Request:

Principal Investigator Name:

Telephone:

Department:

E-mail Address:

Dept. Telephone:

Sponsor Name:

Sponsor Award #:

MU Proposal Number:

MU Project Number:

Award Title:

Restrictive clause(s) reads as follows: please include the full text from the agreement. (If additional space is required use Additional Comment section)

Reason for making this request: PI must explain utility and reasoning as to why acceptance of such a clause is in the best interest of the University. (If additional space is required use Additional Comment section)

Additional Comments:

Principal Investigator Acknowledgements:

1. I have read and understand the agreement, specifically the article(s) referenced above.
2. I agree to fully report any current and/or potential conflicts of interest related to this request.
3. I understand the policy set by the Graduate Faculty Senate stated below:

“Thesis and Dissertation Research Must Be Open to Public Disclosure: Students are prohibited from using research (data, results, methods or other content) in their theses or dissertations that could restrict subsequent publication or public disclosure of these documents. Examples of restricted information include classified or proprietary materials. It is important to note that these restrictions do not apply to non-thesis or non-dissertation research that is approved by the student's adviser and allowed by University of Missouri policies. Questions regarding the applicability of this policy to thesis or dissertation content should be referred to the MU Graduate School.”

4. Nothing patentable is expected to result from this study.

I therefore request approval of the agreement language.

Principal Investigator - Signature	Date
Principal Investigator Name:	

Dean - Signature	Date
Dean - Name	

Chair - Signature	Date
Chair - Name	

Office of Research Reviewer's Initials _____

Based on the foregoing acknowledgements and certifications, I agree to accept the restrictive clause(s) contained in the attached agreement.

 Robert W. Schwartz, Ph.D. Date
 Interim Vice President for Academic Affairs, Research and Economic Development

OSPA USE ONLY:
 SGCA: _____ Date Received: _____

MU Proposal Number:

MU Project Number: