**Request to Draft a Nondisclosure Agreement (NDA)**

|  |
| --- |
| **Section A – Project Contact Information** |
| **COLLABORATING ORGANIZATION:** Click or tap here to enter text. |
| **ORGANIZATION’S PRIMARY PROJECT CONTACT:** Click or tap here to enter text. |
| **ADDRESS:** Click or tap here to enter text. |
| **PHONE:** Click or tap here to enter text. |
| **FAX:** Click or tap here to enter text. |
| **EMAIL:** Click or tap here to enter text. |
| **May DTM Directly Contact Collaborating Organization? Y/N** Click or tap here to enter text. |
| **UM’S PRIMARY PROJECT CONTACT:** Click or tap here to enter text. |
| **UM Position Title:** Click or tap here to enter text. |
| **UM DEPARTMENT:** Click or tap here to enter text. |
| **PHONE:** Click or tap here to enter text. |
| **FAX:** Click or tap here to enter text. |
| **EMAIL:** Click or tap here to enter text. |
| **Section B – Nature of Agreement Requested** |
| **Project Title:** Click or tap here to enter text. |
| **Confidential Information To Be Disclosed By:**[ ] University of Mississippi [ ] Collaborating Organization [ ] Both |
| **HAVE Previous Discussions With The Collaborating Organization Already Taken Place?** [ ]  Yes [ ]  No |
| **Scope Of The Agreement: Description Of Confidential Or Proprietary Subject Matter**Click or tap here to enter text. |

**For more information or assistance, contact ORSP Division of Technology Management 100 Barr Hall ~ (662) 915-1604 ~** **lrmcjunk@olemiss.edu**