

Confidential Disclosure Agreement Request Form

A. Principal Investigator Information	
Principal Investigator:	
College/Department:	
Email:	
Link Blue ID:	
B. Who is Disclosing and/or Receiving confidential information?	
Check One:	
UK is only receiving information	
UK is only disclosing information	
UK is BOTH receiving and disclosing information	
C. Description of confidential information to be discussed (please include relevant IR # if appl	icable):
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D. Description of purpose:	
E. Information Ownership	
If confidential information is being disclosed by the University of Kentucky is the confidential information	
owned solely by the University of Kentucky	☐ Yes ☐ No
If No—name & contact information of person(s) or entity/entities that share ownership:	
F. Other Party Information	
Name of Other Institution:	
Contact Information for Other Party's Contracting Office (Name, Address, Email, telephone):	
Contact Information for Other Party Researcher (Name, Department, Address, Email, telephone):	