**Information Collection Form** (ICF)

(for the development of an agreement between Purdue and an overseas institution/entity)

Sponsored Programs Services (SPS), Global Academic Committee (GAC) members, and the Office of Corporate and Global Partnerships (OCGP) are responsible to review contracts and linkages with overseas institution/entities to ensure that proposed agreements are appropriate and meet Purdue University standards. In order to assist interested parties with the review process, this form is designed to provide background information about the institution/entity and the overall goals of the proposed relationship. It also provides information necessary for SPS to complete the Restricted Person/Party Screening (RPS).

Name of Overseas Institution/entity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Describe the purpose of the proposed agreement, in other words, why is signing an agreement necessary? What Purdue benefits will be derived from a signed agreement?
2. In view of the purpose of this agreement, describe the expected near- and long-term outcomes of the proposal to both institution/entities and the public they serve.
3. Describe the type of schools/colleges that make up the institution/entity, including its accreditation body and ranking, if applicable.
4. How many faculty members and staff are associated with this institution/entity?
5. How many undergraduate and graduate students are enrolled in this institution/entity, if applicable?
6. What specific demographic groups does the university serve or exclude, if applicable (e.g., women’s college)
7. How is the institution/entity funded (publicly or privately)?
8. Describe the number and also the nature/intent of previous and/or current agreements or relationships with this institution/entity. Please also describe Purdue agreements with other institution/entities within the same country.
9. Please list the Purdue faculty/staff who will initially be involved, and their respective academic units.
10. If this is a renewal agreement, discuss the outcomes achieved over the years and also describe the extent to which the goals of the agreement was met.
11. Describe any binding commitments, including financial arrangements, if any (e.g., tuition, health insurance, travel, student exchange, etc.). Does Purdue University have the resources to carry out the proposal? If financial commitments are made, Sponsored Programs Services (SPS) will not approve or sign the document until the appropriate fiscal officer has approved the commitments. In most cases this will be the unit’s Director of Financial Affairs.
12. Principal contacts and Signatories of the Agreement (complete information necessary for RPS screening)

 Proposed Partner Institution/entity Purdue University

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Primary Contacts and Document Signatories:

2. Full name and title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Full name and title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if additional names, list below)