

Appendix B Exemption Request Document

TO: Employee's Personnel Record

RE: _____

(Name of Individual Being Exempted)

Payroll Classification/Title: _____

Employee ID Number: _____

This is to certify that the above-named individual falls within the below marked category and will not use any University research facilities or contract, gift or grant funds obtained by or through the University in the course of his/her appointment. He/she therefore qualifies for exemption from the University's patent agreement requirements.

(Mark one of the following boxes)

- ☐ U.S. government employees on assignment at the University but who are not compensated by the University.
- ☐ Instructors of University Extension
- ☐ Individuals on short-term appointment (one year's duration or less) teaching a class or course that does not involve student research or student design.
Course Name and Number: _____
Start Date: _____ End Date: _____
- ☐ Clinical appointees who are not compensated by the University and not involved in University clinical trials.
- ☐ Individuals using an approved recharge facility/equipment on behalf of an external party who is/are paying an approved external user fee.
External Party: _____

(signed) [insert name]
Department Chairperson

Date

I, _____, agree that I will not use any University research facilities or gift, contract or grant funds obtained by or through the University in the course of my appointment. If I do, I understand that the University Patent Policy will apply to my use of University research facilities or gift, contract or grant funds obtained by or through the University.

(signed) [insert name]
Exempted Individual

Date

Received, accepted, and approved by UCR Office of Technology Partnerships.

(signed) Brian Suh
Director, Technology Commercialization

Date

Per UC Business & Finance Bulletin G-40, this signed statement must be filed in the individual's UCPath record.