

**SUBRECIPIENT COMMITMENT FORM**

All subrecipients should complete this form when submitting a proposal to UADA CES. It provides a checklist of documents and certifications required by sponsors, as well as an area for the authorized institutional representative to sign.

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**SECTION A – Contact Information**

UADA PI: \_\_\_\_\_

Prime Sponsor: \_\_\_\_\_

Prime Sponsor Grant Program: \_\_\_\_\_

UADA Proposal Title: \_\_\_\_\_

*Subrecipient Information*

Subrecipient Legal Name: \_\_\_\_\_

Performance Site Address: \_\_\_\_\_

UEI #: \_\_\_\_\_ Performance Site Congressional District: \_\_\_\_\_

EIN: \_\_\_\_\_

Subrecipient's Performance Period: Begin: \_\_\_\_\_ End: \_\_\_\_\_

Sponsor Dollars Requested: \$ \_\_\_\_\_

*Principal Investigator Contact Information*

Legal Name/Title: \_\_\_\_\_

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

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

*Administrative/Contractual Contact Information*

Name/Title: \_\_\_\_\_

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

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

*Single Audit Contact Information*

Name/Title: \_\_\_\_\_

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

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

*Financial Contact Information*

Name/Title: \_\_\_\_\_

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

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

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## SECTION B - Proposal Documents

The following documents are included in our subaward proposal submission and covered by the certifications below:

- STATEMENT OF WORK** (*required*)
  - BUDGET AND BUDGET JUSTIFICATION** (*required*)
  - SUBRECIPIENT COMMITMENT FORM** (*this form*) *completed & signed by subrecipient authorized institutional representative (required)*
  - LETTER OF COMMITMENT** *completed & signed by subrecipient authorized institutional representative (as required)*
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## SECTION C - Certifications

1. **Facilities and Administrative Rates** included in this proposal have been calculated based on:

- Our United States federally negotiated F&A rates for this type of work, or a reduced F&A rate that we hereby agree to accept. A copy of your U.S. F&A agreement or URL link to the agreement must be furnished to Purdue with this form. If a U.S. federally negotiated F&A rate is not available, the resulting award will only fund direct costs.

\_\_\_\_\_ = F&A Rate

- No Negotiated Rate (requesting de minimis rate of 10%)
- Not applicable

2. **Fringe Benefit Rates** included in this proposal have been calculated based on:

- Rates consistent with or lower than our federally-negotiated rates (*if this box is checked, a copy of your Fringe Benefit rate agreement must be furnished to UADA before a subaward will be issued*). Rate : \_\_\_\_\_%

3. **Human Subjects**     Yes     No

*(If "Yes": Copies of the IRB approval and approved "Informed Consent" form must be provided before any subaward will be issued. Please forward these documents to UADA PI as soon as they become available. This is required before any subaward will be issued.)*

**If "Yes" and PHS funding is involved: Have all key personnel involved completed Human Subjects Training?**     Yes     No

*Note: All key personnel engaged in human subject research must take the NIH human subjects training or human subject research training ([http://grants.nih.gov/grants/policy/hs\\_educ\\_faq.htm](http://grants.nih.gov/grants/policy/hs_educ_faq.htm))*

4. **Animal Subjects**     Yes     No

*(If "Yes": A copy of the IACUC approval must be provided before any subaward will be issued. Please forward this document to UADA PI as soon as it becomes available. This is required before any subaward will be issued.)*

**5. Select Agents or other Biohazards**       Yes       No

*(If "Yes": A copy of the approval must be provided before any subaward will be issued. Please forward this document to UADA PI as soon as it becomes available. This is required before any subaward will be issued.)*

**6. Export Controlled information or material**       Yes       No

*(If "Yes": A copy of the approval must be provided before any subaward will be issued. Please forward this document to UADA PI as soon as it becomes available. This is required before any subaward will be issued.)*

**7. Radioactive Materials**       Yes       No

*(If "Yes": A copy of the approval must be provided before any subaward will be issued. Please forward this document to UADA PI as soon as it becomes available. This is required before any subaward will be issued.)*

**8. Conflict of Interest (applicable to NIFA and federal projects only requiring federal financial disclosure)**

- Not applicable because this project is not being funded by any program requiring financial disclosure.
- Subrecipient Organization/Institution hereby certifies that it has an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research." Subrecipient also certifies that, to the best of Institution's knowledge, (1) all financial disclosures have been made related to the activities that may be funded by or through a resulting agreement, and required by its conflict of interest policy; and, (2) all identified conflicts of interest have or will have been satisfactorily managed, reduced or eliminated in accordance with subrecipient's conflict of interest policy prior to the expenditures of any funds under any resultant agreement.
- In the event that Subrecipient does not have a financial conflict of interest policy, Subrecipient shall comply with Prime Recipient's financial conflict of interest policy (Available at: <http://www.uasys.edu/policies/330.1.PDF> ). Prior to engaging in any work under this Agreement, all Subrecipient Investigators must submit a conflict of interest disclosure statement of Prime Recipient's Conflict of Interest Office and any financial conflicts of interest must be identified and managed. Subrecipient shall further require all Subrecipient Investigators to update their conflict of interest disclosures statements at least annually and within thirty (30) days of any change for the duration of this Agreement. Identification and management of conflicts of interest shall be at Prime Recipient's sole discretion, and Subrecipient shall cooperate with and require Subrecipient Investigators to cooperate with Prime Recipient with any management plans imposed.  
*In the event Subrecipient becomes aware, or Prime Recipient reasonably determines, that any Subrecipient Investigator has failed to comply with the foregoing, Subrecipient shall immediately remove such Subrecipient Investigator from service to Prime Recipient. If such failure necessitates a retrospective review, as required by 42 CFR § 50.605(a), Subrecipient shall reimburse Prime Recipient for reasonable costs and expenses associated with such review and mitigation of any bias identified.*

**9. Responsible Conduct in Research Education (applicable to NIFA and federal projects only)**

- The Authorized Organizational Representative of the applicant institution is certifying that upon acceptance of a subaward of National Institutes of Food and Agriculture (NIFA/USDA) funds with terms and conditions; the institution has or will develop procedures to comply with responsible and ethical conduct of research training requirements for personnel (including faculty) participating in the project.

**10. Cost Sharing/Matching/In-Kind**     Yes             No            Amount: \$ \_\_\_\_\_  
 (Cost sharing, Matching, and/or In-Kind amounts and justification must be included in the subrecipient's budget).

**11. Certification Regarding Debarment and Suspension**

Is the entity, PI or any other employee or student participating in this project debarred, suspended or otherwise excluded from or ineligible for participation in federal department, agency, assistance programs or activities?

- Yes         No    (If "yes", explain in Section E Comments below.)

***Subawards to any entity or individual included in the Federal excluded Parties are prohibited.***

**SECTION D – Audit Status**

1. Does the subrecipient receive an annual single audit in accordance with OMB Circular A-133 (prior to 12/26/2014) or OMB's Uniform Guidance, 2 CFR 200 (after 12/26/2014)

Yes         No        Fiscal year of most recent single audit: FY \_\_\_\_\_

2. Were any audit findings reported in your most recent single audit?

Yes         No        If "YES," provide a description of the finding:

3. Subrecipients receiving an annual audit are required to provide a copy of the most recent single audit report or the URL link to UACES Sponsored Programs before a subaward will be issued.

URL link: \_\_\_\_\_

4. If subrecipient does not receive an annual audit in accordance with OMB Circular A-133 (prior to 12/26/2014) or OMB's Uniform Guidance, 2 CFR 200 (after 12/26/2014), please select the appropriate box indicating why the subrecipient would not be subject to compliance with single audit certification: (check all that apply)

- Subrecipient receives overall federal funding less than \$500,000 per year?  
 Subrecipient receives overall federal funding less than \$750,000 per year? (after 12/26/2014)  
 Non-Profit entity (under federal funding threshold)  
 Government Entity  
 Foreign Entity  
 Federal Agency  
 For-Profit Entity

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**SECTION E - Federal Funding Accountability and Transparency Act (FFATA)**

1. If a federal award, does Subrecipient currently have an active registration in the System for Award Management ([www.sam.gov](http://www.sam.gov))?       Yes       No

*NOTE:* Organizations that have not registered with SAM will need to obtain a DUNS number first and then access the SAM online registration through SAM home page at <https://www.sam.gov>.  
*Subrecipients must be registered and maintain their current information in SAM.*

2. Exempt from reporting compensation?       Yes       No    If no, proceed with filling out the top 5 paid officers below. Executive compensation information for the Subrecipient must be reported if: More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually; compensation information is nor already available through reporting to the Security & Exchange Commission (SEC).

Officer 1	Name	_____	Compensation	_____
Officer 2	Name	_____	Compensation	_____
Officer 3	Name	_____	Compensation	_____
Officer 4	Name	_____	Compensation	_____
Officer 5	Name	_____	Compensation	_____

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**SECTION F – Comments**

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

**APPROVED FOR SUBRECIPIENT:**

The information, certifications and representations above have been read, signed and made by an authorized official of the subrecipient named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency policy in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies. **Any work begun and/or expenses incurred prior to execution of a subaward agreement are at the subrecipient's own risk.**

\_\_\_\_\_  
(Signature of Subrecipient's Authorized Official)

\_\_\_\_\_  
(Type or print name and title of Authorized Official)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Fax)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Date)