

Part 1: Proposal Information

Completed by UVA Application Title: **UVA PI Name:** Prime Sponsor: Other Sponsor Name: Project Period: Application Type: Start Date End Date Any organization planning to enter into a collaborative subrecipient relationship with the University of Part 2: Project Information Completed by all Subrecipients Virginia (UVA) must complete this form at the proposal stage. **Subrecipient Legal Information** Place of Performance/Sub Pl Address Address Subrecipient Legal Name City UEI FIN **Subrecipient Principal Investigator** Country Name State Postal Code Position/Title Subrecipient Congressional District: Department Please select: All work will be performed at Subrecipient Institution Phone Number Some work will be performed at UVA by Subrecipient All work by Subrecipient will be performed at UVA Email **Subrecipient Administrative Contact** Will any of the funded activities, excluding Subrecipient's primary Place of Performance, be Name performed outside of the United States? No Phone Number Yes, please explain: Email Are you a U.S. or Non-U.S. Entity? U.S. Entity

Non-U.S. Entity (for NIH funded projects, please see additional certification language on page 5 of this form)

| Will the Subrecipient's scope of work include human subjects research? | | | Will the Subrecipient's scope of work include animal subjects research? | | | |
|--|--|----------------------------------|--|--|---|--|
| No | Yes | | No | Yes | | |
| Federalwide Assurance Number: | | Animal Welfare Assurance Number: | | | | |
| IRB Approval Date: | | | IACUC Approval Date: | | | |
| If "yes," the IRB approval(s) must be provided before any subaward/subcontract will be issued. Approval date not required at time of proposal. | | | If "yes," the IACUC approval(s) must be provided before any subaward/subcontract will be issued. Approval date not required at time of proposal. | | | |
| Ethics in Research | n Training | | | | | |
| • | | | arch (e.g., students, post sponsible and ethical co | | | |
| Yes | No | | | | | |
| Responsible Condu | uct of Research (RCR) | for NSF-funded | projects only) | | | |
| | | | meet NSF's Educational F e "America COMPETES Ac | Requirements for the t" Public Law 110-69, August | : | |
| Yes | No | | | | | |
| · | ies that it has a training docs in accordance with No | | ace and will train all unde quirements. | ergraduate and graduate | | |
| Subrecipient Budget Information Subrecipient's Total Funds Requested: | | | | | | |
| Facilities and Adm | inistrative Rates (F&A) | | Fringe Benefit Rates | | | |
| Federally negot | iated rate Rates app | olied: | Federally negotiate | d rate Rates applied: | | |
| Sponsor's requi | red rate | | Sponsor's required | rate | | |
| 10% de minimis | srate | | Other | | | |
| Other | | | | | | |
| Is cost share requi | red or included in the S | Subrecipient bu | dget? If yes, please inclu | de a cost share budget. | | |
| Yes, in the am | nount of: | No | | | | |
| Is participant supp | ort included in the Sub | recipient budge | et? | | | |
| Yes | No | | | | | |

Participant support costs means direct costs that support participants (see definition for Participant in § 200.1) and their involvement in a Federal award, such as stipends, subsistence allowances, travel allowances, registration fees, temporary dependent care, and per

diem paid directly to or on behalf of participants.

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Is your organization a member of the Federal Demonstration Partnership, with a Profile in the FDP Expanded Clearinghouse?

Yes If yes, please skip to Part 4: Approvals on page 5. You do not need to complete Part 3.

No If no, please complete Part 3. UVA will require some additional information about your organization.

Part 3: Additional Information

Completed by non-FDP Members. FDP Members skip to Part 4.

Is the Subrecipient organization presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in any Federal Department or Agency?

Yes No

Is the Subrecipient organization delinquent on repayment of any Federal debt including direct and guaranteed loans and other debt as defined in OMB Circular A-129, "Managing Federal Credit Programs"?

Yes No

If the Subrecipient answered "Yes" to either of the above questions, it may not be possible to establish a Subaward agreement with the organization.

Subrecipient Legal Address Address Name City Position/Title Country Department State Postal Code (Zip + 4) Format: ______ Format: ______ Email

Rate Agreements

Please provide a copy or link to the Subrecipient's F&A Rate Agreement:

Subrecipient does not have a F&A Rate Agreement

Please provide a copy or link to the Subrecipient's Fringe Benefit Rate Agreement:

Subrecipient does not have a Fringe Benefit Rate Agreement

Conflict of Interest

Please select one:

Subrecipient organization/institution hereby certifies that it has in place an active and enforced financial conflict of interest policy that complies with the provisions of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research" (NIH applications), or the provisions of AGG Chapter IV.A "Conflicts of Interest Policies" (NSF applications).

Subrecipient also certifies that, to the best of the 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 expenditure of any funds under any resultant agreement.

42 CFR Part 50, Subpart F(NIH applications) | AGG Chapter IV.A(NSF applications)

Please provide a copy or link to the Subrecipient's Financial Conflict of Interest Policy:

Subrecipient does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by UVA's policy and related procedures.

All Subrecipient investigators (defined as "the Principal Investigator and any other person who is responsible for the design, conduct, or reporting of the research") must complete the University of Virginia's Annual Disclosure of Financial Interests with Outside Entities form.

UVA's Conflict of Interest Policy

Audit Status

Please select one:

Subrecipient receives an annual audit in accordance with OMB Circular A-133.

Please provide a copy or link to the Subrecipient's most recent fiscal year A-133/Single Audit:

Were any audit findings or Management Responses reported? No Yes

Please provide a copy or link to the Subrecipient's audit findings and/or Management Response Letter:

Subrecipient does not receive an annual audit in accordance with OMB Circular A-133, but Subrecipient's financial statements are audited by a government agency or an independent public accountant.

Please provide a copy or link to the Subrecipient's most recent fiscal year audit:

Subrecipient's financial statements are not audited by a government agency or an independent public accountant.

Please complete and attach the Mini Audit Questionnaire

Part 4: Approvals

Completed by all Subrecipients

APPROVED FOR SUBRECIPIENT: The information, certifications, and representations above have been read and approved by an authorized official AND Principal Investigator of the Subrecipient institution 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/ subcontract agreement are at the Subrecipient's own risk. No work involving human subjects and/or animal subjects may begin until the Subrecipient has obtained registered Institutional Review Board and/or Institutional Animal Care and Use Committee review and approval.

Subrecipient certifies to the best of its knowledge and belief that the information provided herein is true, complete, and accurate. Subrecipient is aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.

Additional Certification for Non-U.S. Entities collaborating on NIH funded projects only:

Subrecipient certifies that it has the necessary resources, expertise, and facilities to carry out the proposed research activities and to comply with the applicable policies and regulations. Subrecipient understands the relevant NIH requirements, including NOT-OD-23-182. If funded, Subrecipient agrees to provide access to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report to the University of Virginia with a frequency of no less than once per year, in alignment with the timing requirements for Research Performance Progress Reports.

| Signature of Subrecipient Authorized Signing Official (e-signature preferred) | | Date |
|---|-------|------|
| | Name | |
| | Title | |

Supporting Documents

Please attach the following documents with your completed Consortium Commitment Form:

Attachments:

Statement of Work Detailed Budget Budget Justification

Attach if Applicable:

Biosketches of key personnel
(for continuations, new key personnel only)
Resources/Facilities
Letters of Support
All personnel report (continuations only)
Regulatory approvals (continuations only)
Cost Share budget
F&A Rate Agreement
Fringe Benefit Rate Agreement
Disclosure of Financial Interests form
A-133/Single Audit or Audited Financials or
Mini Audit Questionnaire
Audit Findings and/or
Management Response Letter