

**UNIVERSITY OF SOUTH ALABAMA  
AGREEMENT MODIFICATION**

**SUBAWARD AGREEMENT INFORMATION**

To modify an existing Subaward between USA and another institution, organization or business, please complete and provide this form and necessary documentation to your appropriate College / Department Grant Administrator.

Modifications to existing Agreements may require prior approval by the funding agency. Such changes can include: change in the project's Scope of Work, absence or change of Principal Investigator or key personnel, foreign travel, budget revisions to existing stipends or tuition remission, change in performance site, and the addition of equipment. This is not an inclusive list as Agency guidelines may require varying approvals by Agency grant personnel. Any action requiring prior approval must be secured from the appropriate funding-agency personnel **PRIOR** to modification of an existing Subaward.

Principal Investigator \_\_\_\_\_  
Subaward Title \_\_\_\_\_  
SPA Log # \_\_\_\_\_ FOAPAL # \_\_\_\_\_

**MODIFICATION REQUESTED (Check and complete all that apply)**

- Change of Project Period Dates  
Existing Dates: Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
Modified Dates: Start Date \_\_\_\_\_ End Date \_\_\_\_\_
- Termination of Agreement (*Minimum of 30 days notice to Subrecipient is required*) Termination Date \_\_\_\_\_
- Increase to existing Budget \$ \_\_\_\_\_
- Decrease to existing Budget \$ \_\_\_\_\_
- Change in Scope of Work (Attach a revised Scope of Work)
- Change in Budget (Attach a revised Budget)
- Carry forward of funds
- Other \_\_\_\_\_

**COMPLIANCE**

Will Subrecipient use human subjects? YES  NO

*If "YES", copy of Subrecipient approval required.*

Will Subrecipient use animals in the course of the research? YES  NO

*If "YES", attach approval letter. If at a foreign site, follow*

<http://www.southalabama.edu/researchcompliance/pdf/domesticandforeignsubcontracts.pdf>

Were there any changes related to the following during the previous period?

Change to Subrecipient PI or Key Personnel? YES  NO

Change in Budget? YES  NO

Change in Scope of Work? YES  NO

**EXPORT CONTROLS**

YES  NO  Will any equipment be exported by the University in the course of this project?

YES  NO  Will this project require any export controlled information to be received on campus?

YES  NO  Will this project involve any foreign nationals?

**CONFLICT OF INTEREST**

YES  NO  Have all participants involved in this project complied with the policies of their institution regarding disclosures of conflict of interest(s)?

**AUTHORIZATION**

I have read this Agreement, including all attachments and exhibits and have reviewed this Agreement with the Administrator, Dean, Vice President, Director or Chair, and that individual is aware of all business terms of this Agreement. The business terms negotiated and agreed to by the parties are contained in this Agreement.

**Principal Investigator or  
Responsible Person**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Dean/Department Head/Administrator**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date