

## University of South Alabama – Subrecipient Commitment Form

Please complete and return with the **required** proposal documents: Statement of Work, Budget, and Budget Justification.

USA Information			
USA PI:		CAYUSE NUMBER:	
PROPOSAL TITLE:			
PERIOD OF PERFORMANCE:		PRIME SPONSOR:	
Subrecipient Information			
Subrecipient Organization:			
Principal Investigator (name & email):			
Administrative Contact (name & email):			
Period of Performance:		Proposed Sub Amount:	
Subrecipient Address with ZIP + 4:		Performance Site Address with ZIP + 4:	
Congressional District - Organization:		Congressional District – Performance Site:	
DUNS:	SAM UEI:	SAM.gov expiration date:	EIN:
Required Subrecipient Certifications			
<b>Do you have a negotiated Indirect Cost Rate Agreement with a U.S. cognizant agency?</b> YES: Provide the URL or a copy with this form: NO: Unless other restrictions or sponsor conditions exist, the Uniform Guidance 10% de minimis rate will apply. Where the sponsor or funding opportunity restricts indirect costs, the proposed budget should use the sponsor/opportunity rate.			
Proposed Cost Sharing: YES      NO      Amount: \$ If applicable, cost sharing amounts and justification must be included in the Subrecipient budget			
Human Subjects	Yes      No	If Yes: FWA#	Human Stem Cells      Yes      No
Animal Subjects	Yes      No	IF Yes: Assurance#	Animals Euthanized?      Yes      No
Please note: Copies of IRB/IACUC approval must be provided before a subaward will be issued.			
Subrecipient or Subrecipient Principal Investigator Debarred or Suspended			Yes      No
<b>FCOI:</b> Subrecipient has implemented a written policy for Investigator Financial Disclosure and Conflict of Interest (FCOI) consistent with agency requirements.			Yes      No      N/A
<b>RCR:</b> Subrecipient certifies that a Responsible Conduct of Research (RCR) Training Plan is in place consistent with agency requirements.			Yes      No      N/A
<b>Export Control:</b> Subrecipient certifies that an Export Control Office, or other authorized Person, has reviewed the Subrecipient proposal for compliance with Federal Export Control Laws.			Yes      No      N/A
<b>Audit:</b> Is Subrecipient subject to Uniform Guidance 2 CFR 200.331 Subpart F – Audit Requirements? YES: Most recent fiscal year audit completed: NO: USA requires Subrecipient to complete a financial status questionnaire before a subaward will be issued.			
Authorized Official Approval			
Approved by Subrecipient: I certify that my organization is correctly categorized as a Subrecipient and not a Contractor. The information and certifications 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 the prime agency's 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 subrecipient agreement are at the subrecipients's risk.			
_____ Signature of Subrecipient's Authorized Official			_____ Date
_____ Name and Title of Authorized Official			