

# SUBRECIPIENT COMMITMENT FORM

Subre	cipient Legal Name:							
Subre	ainiant DI Nama							
	Address:				City:		State:	
	ess where research will be pe	erformed:			City:	_		
•	e Entity Identifier (UEI):						_	
	rmance Period Begin Date:							
Total I	Direct Costs:		To	otal F&A:		Total Requeste	ed:	
BVAR	RI PI Name:							
Prime	Sponsor:							
SECT	ION A – Proposal Docume	nts						
	STATEMENT OF WORK BUDGET AND BUDGET Biosketches of all Key Pe Other: Other: TION B - Certifications	TJUSTIFICATI ersonnel, in ag	ency-req	uired format		ated based on:		
1.	Facilities and Administrative Rates included in this proposal have been calculated based on:							
							ereby agree to accept.  Comments below)	
2.	Fringe Benefit Rates included in this proposal have been calculated based on:							
				ederally-negotiated which the rate has		ed in Section D	Comments below).	
3.	Human Subjects  If "Yes": Copies of the I issued. Please forward t				nsent" form mi	-	before any subaward will be	
4.								
	Animal Subjects	Yes	No	Approval Da	te:			
	If "Yes": A copy of the forward this document			•	•		issued. Please	

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### 5. Conflict of Interest (applicable to PHS and other sponsors that have adopted the federal financial disclosure requirements)

Not applicable because this project is not being funded by NIH, NSF, or other sponsor that has adopted the federal financial disclosure requirements

Subrecipient Organization/Institution 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 though 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; and (3) if an fcoi related to the work on Prime's award is identified, subrecipient will notify our Research Office within 30 days of subrecipient PI's disclosure.

Subrecipient does not have an active and/or enforced conflict of interest policy but will adopt the COI FDP Model Policy to be found at: <a href="http://sites.nationalacademies.org/PGA/fdp/PGA">http://sites.nationalacademies.org/PGA/fdp/PGA</a> 061001

#### 6. Debarment and Suspension

Is the PI or any other employee or student participating in this project debarred, suspended or otherwise excluded from or ineligible for participation in federal assistance programs or activities? Yes No (if "Yes", explain in Section D Comments below)

The Subrecipient certifies they: (answer all questions below)

are	are not	presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal contracts
are	are not	presently indicted for, or otherwise criminally or civilly charged by a government entity
hav	ve have not	within three (3) years preceding this offer, been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) contract of subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property
hav	ve have not	within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency

## **SECTION C - Audit Status**

#### 7. Audit Status

Subrecipient receives an annual audit in accordance with 2 CFR 200, subpart F.

Most recent fiscal year completed: FY\_\_\_\_\_\_\_\_
Were any audit findings reported? (If "Yes," explain in Section D, Comments, below.)

Yes No

Please attach a complete copy of your most recent single audit report or provide the URL link to a complete copy. Subrecipient DOES NOT receive an annual audit in accordance with 2 CFR part 200, subpart F.

Subrecipient is a: Non-profit entity (under federal funding threshold)

Foreign entity
For profit entity
Government entity

## SUBRECIPIENT COMMITMENT FORM

SECTION D - Comments					
Subrecipient named herein. The appropriate programm agency policy in regard to subawards and are prepared those policies. Any work begun and/or expenses inc Subrecipient's own risk.	we have been read, signed and made by an authorized official of the natic and administrative personnel involved in this application are aware of to establish the necessary inter-institutional agreements consistent with curred prior to execution of a subaward agreement are at the				
Signature of Subrecipient's Authorized Official	Legal Name of Subrecipient's Organization/Institution				
Name and Title of Authorized Official	Address				
Email	City, State, Zip				
Phone					
	Federal Employer Identification Number (EIN)				
Date	UEI Number				
Date					