



**SUBRECIPIENT COMMITMENT FORM**

**SECTION A: Prime Recipient Proposal Information**

Principal Investigator: \_\_\_\_\_ Department: \_\_\_\_\_

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

Prime Sponsor: \_\_\_\_\_ Prime Award No: \_\_\_\_\_

Project Title: \_\_\_\_\_

Period of Performance: From: \_\_\_\_\_ To: \_\_\_\_\_

Proposed Period of Performance of Subrecipient (if different): From: \_\_\_\_\_ To: \_\_\_\_\_

**SECTION B: Subrecipient Eligibility**

Dear (Potential) Subrecipient:

Any organization planning to enter into a collaborative subrecipient relationship with CSUEB must complete this form at the proposal stage. Please answer the following questions to determine if a formal subrecipient partnership can be established between your organization and CSUEB. This form will be considered valid for the duration of the project from the date of signature by your organization's Authorized Official.

Please answer the following questions **BEFORE** completing the rest of the form.

Yes No Is your organization, Principal Investigator, or any other employee presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in any Federal assistance programs or activities?

Yes No Has your agency or any personnel 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 or 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.

If you answered **YES** to either of the above questions it will not be possible to establish a subagreement with your organization and you need not complete the remaining sections of this form. Please notify the CSUEB Principal Investigator as soon as possible.

**SECTION C: Subrecipient Information**

Subrecipient Legal Name: \_\_\_\_\_ Tax ID/FEIN No: \_\_\_\_\_

Organization's Address: \_\_\_\_\_

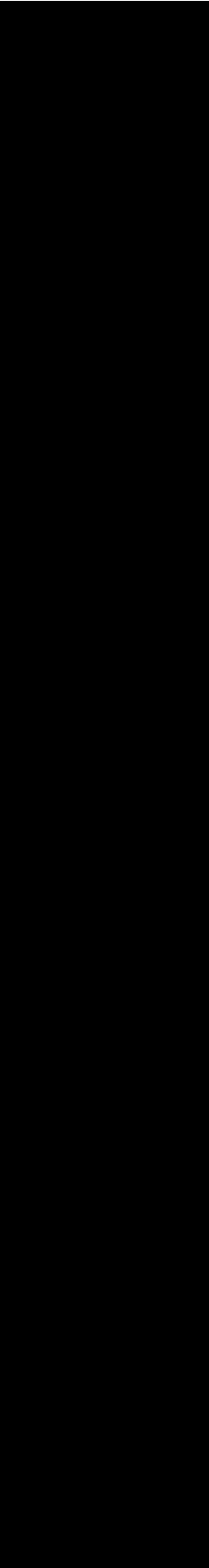


**SECTION C: Subrecipient Information (continued)**

Name of Suprecipient's Project Director/PI: \_\_\_\_\_

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

Amount of Funding Requested: \$5,320,000.00 (Five million, three hundred twenty thousand dollars and no cents)  
Total Project Budget: \$5,320,000.00 (Five million, three hundred twenty thousand dollars and no cents)  
Total Project Cost: \$5,320,000.00 (Five million, three hundred twenty thousand dollars and no cents)  
Total Project Revenue: \$0.00 (Zero dollars and no cents)  
Total Project Net Cost: \$5,320,000.00 (Five million, three hundred twenty thousand dollars and no cents)





**SECTION E: Certifications (continued)**

**4. Human Subjects Compliance (IRB):**

Yes No Human Subjects will be involved in the Subrecipient’s portion of this project.

Exemption Number or IRB Approval Date: \_\_\_\_\_ IRB Number: \_\_\_\_\_

If answer to the above is **YES**, copies of the determination of exemption or IRB approval must be provided before a subaward will be issued.

If **YES** and **NIH** funding is involved:

Have all key personnel involved completed human subjects training? Yes No

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

Does your organization have a Federalwide Assurance (FWA) Number? Yes No

If **YES**, FWA number: \_\_\_\_\_

**5. Animal Subjects Compliance (IACUC):**

Yes No Animal Subjects will be involved in Subrecipient’s portion of this project

Approval Date: \_\_\_\_\_ IACUC Number: \_\_\_\_\_

If answer to the above is **YES**, copies of the IACUC approval must be provided before a subaward will be issued.

Does your organization have a PHS Animal Welfare Assurance Number? Yes No

If **YES**, PHS Animal Welfare Assurance Number: \_\_\_\_\_



**SECTION E: Certifications (continued)**

**7. Responsible Conduct of Research (if applicable):**

The prime sponsor of this project is:

**National Science Foundation**

- x **Statutory Requirement:** The Director shall require that each institution that applies for financial assistance from the Foundation for science and engineering research or education describe in its grant proposal a plan to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduate students, graduate students, and postdoctoral researchers participating in the proposed research project.
- x **Certification Regarding Responsible Conduct of Research (RCR):** The AOR is required to complete a certification that the institution has a plan to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduates, graduate students, and postdoctoral researchers who will be supported by NSF to conduct research. Additional information on NSF's Responsible Conduct of Research (RCR) policy is available in the Award and Administration Guide (AAG), Chapter IV.B.
- x **Institutional Responsibilities:**
  - A. An institution must have a plan in place to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduates, graduate students, and postdoctoral researchers who will be supported by NSF to conduct research. As noted in NSF Grant Proposal Guide (GPG) Chapter II.C.1e, institutional certification to this effect is required for each proposal.
  - B. While training plans are not required to be included in proposals submitted to NSF, institutions are advised that they are subject to review, upon request.
  - C. Institutions are responsible for verifying that undergraduate students, graduate students, and postdoctoral researchers supported by NSF to conduct research have received training in the responsible and ethical conduct of research.

**National Institutes of Health**

- x **Policy:** NIH requires that all trainees, fellows, participants, and scholars receiving support through any NIH training, career development award (individual or institutional), research education grant, and dissertation research grant must receive instruction in responsible conduct of research. This policy will take effect with all new and renewal applications submitted on or after January 25, 2010, and for all continuation (Type 5)

Office of Research &



**SECTION F: Audit Status**

**1. A-133 Audit Status:**

Yes No Does your organization receive an annual audit in accordance with OMB Circular A-133?

If **NO**, please indicate why your organization is not subject to A-133 audit requirements:

- Organization received less than \$500,000 in federal funds per year.
- Organization is a for-profit entity that expends Federal or Sub-Federal funds and has a DCAA audited rate
- Organization is a for-profit entity that does not expend Federal funds or have annual audits
- Organization is a foreign entity.

Please Note: If Subrecipient has not received an A-133 Audit, CSUEB will require the Subrecipient to complete an OMB Letter of Audit Certification prior to the establishment of a subaward.

If **YES**, please respond to the following:

Yes No Has your organization's A-133 audit been completed for the most recent fiscal year? (if you responded **YES** to this question, please provide a copy for us)

If **NO**, when is it expected to be completed (mm/dd/yy): \_\_\_\_\_

Yes No Were there any findings reported? If **YES**, please attach an explanation.

**2. Federal Funding Accountability and Transparency Act (FFATA):**

DUNS Number of Subrecipient:

