

Subrecipient Commitment Form

Note: All subrecipients must complete this form when submitting a proposal to DU. It provides documents and certifications required by sponsors and it must be endorsed by the authorized official prior to proposal submission.

Subrecipient's Legal Name: Subrecipient's PI: Prime Sponsor: Place of Performance: Project Title: Performance Period Begin Date: Total Requested Funds: Yes \(\scale \) No \(\scale \) Is cost sharing is included in the proposal budget? If "Yes", cost sharing sources must be included in the subrecipient's budget. Please note that an annual verification of cost share commitment will be required.		
Proposal Documents		
 □ Statement of Work (Required) □ FFATA Description (Required if federal AND statement of work is over 4,000 characters) □ Budget and Budget Justification (Required) □ Biographical Sketches for all Key Personnel □ Letter of Intent □ Other: Before completing the remainder of the form, please see subrecipient determination form located here. 		
Project Certifications		
Animal Subjects: Yes \square No \square If "Yes", what is the status of the IACUC protocol approval? Pending Approval \square Approved \square		
If Approved, please provide: Protocol No Approval Date:		
If "Yes": A copy of the IACUC approval must be provided before any subagreement will be issued. Please attach or provide these documents to DU's PI as soon as they become available.		
Human Subjects: Yes \square No \square If "Yes", what is the status of the IRB protocol approval? Pending Approval \square Approved \square		
If Approved, please provide: Protocol No Approval Date:		
If "Yes": A copy of the IRB approval must be provided before any subagreement will be issued. Please attach or provide these documents to DU's PI as soon as they become available.		
Research Data Yes No Will Research Data will be exchanged under this Subaward?		
If "Yes", check ALL that apply: □ From the Subrecipient to DU □ From DU to the Subrecipient		
Ethics in Research Training (applicable to projects funded by NSF) ☐ Not applicable because this project is not being funded by NSF. ☐ Subrecipient Organization/Institution hereby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by this NSF award will be trained on the oversight in the responsible and ethical conduct of research.		

Yes Yes Yes	□ No □	Does the project include work covered by ITAR or EAR? Does the Subrecipient have an acceptable accounting and procurement system? Does the Subrecipient have adequate experience receiving similar federal awards?		
 Our institution/organization is a participant in the FDP Clearinghouse and certifies the remaining requested information is current and available through the FDP clearinghouse online system. If applicable, skip to Institutional Approvals. 				
Add	itional Certif	ications		
Facil	rate agreement <i>must</i> be provided.			
		_ Base Type: (No indirect costs are requested by Subrecipient).		
Fringe Benefit Rates included in this proposal have been calculated based on the following: Rates are consistent with our Federally negotiated rates. If this box is checked, a copy of your Federal fringe benefit rate agreement <i>must</i> be provided. Other rates as specified in Comments section at the end of the form (please specify the basis on which the rate has been calculated in the comments section of this form)				
rate has been calculated in the comments section of this form). Conflict of Interest				
	Subrecipient C that is consiste Objectivity in financial discle agreement, ar will have beer interest policy	Organization/Institution certifies that it has an active and enforced conflict of interest policy ent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Research." Subrecipient also certifies that, to the best of Institution's knowledge, (1) all osures have been made related to the activities that may be funded by or through a resulting and required by its conflict of interest policy; and, (2) all identified conflicts of interest have or a satisfactorily managed, reduced or eliminated in accordance with subrecipient's conflict of a prior to the expenditures of any funds under any resultant agreement. Oes not have an active and/or enforced conflict of interest policy and agrees to abide by DU's		
Audi	Audit Status			
Yes \square No \square Was the subrecipient required to conduct an annual audit in accordance with the Single Audit Act or Uniform Guidance Subpart F, Audit Requirements for the most recent Audit year? If "Yes", A complete copy of subrecipient's most recent audit report, or the Internet URL link to a complete copy, must be furnished to ORSP before a subaward will be issued.				
Yes \square No \square Were there any audit findings reported? If "Yes", please provide a certificate of compliance and/or management plan.				
Deba Yes	□ No □ Is	the PI or any other employee or student participating in this project, debarred, suspended or therwise excluded from or ineligible for participation in federal assistance programs or ctivities?		
If "Y		ain in Comment Section at the end of the form. Note: Subawards to any entity or individual included in the Federal Excluded Parties are prohibited.		
□ aı	re □ are not	presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal contracts. presently indicted for, or otherwise criminally or civilly charged by a government agency.		
□ ai		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		

commissions of 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.			
\square have \square have not within 3 years preceding this offer, had one or more contracts terminated for			
default by any federal agency.			
SAM Registration Yes □ No □ Is subrecipient currently registered in Central Contractor Registration via SAM? (www.sam.gov)			
If "No", organizations that have not registered with CCR will need to obtain a DUNS number first and then access the CCR online registration through the SAM (System for Award Management) home page at https://www.sam.gov (U.S. organizations will also need to provide an Employer Identification Number from the Internal Revenue Service that may take an additional 2-5 weeks to become active). Completing and submitting the registration takes approximately one hour to complete and your CCR registration may take 3-5 business days to process. Subrecipient <i>must</i> maintain current CCR information in SAM.			
Subrecipient EIN Number: Subrecipient DUNS Number:			
Comments:			
Institutional Approval			
The information, certifications and representations 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 award of agency policy in regard to subagreements 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 subagreement are at the Subrecipient's own risk.			
Signature of Subrecipient's Authorized Official			
Name and Title of Authorized Official (Print)			
Date Email			