

ILLINOIS STATE UNIVERSITY Subrecipient Commitment Form

All subrecipient organizations must complete this form when submitting a subaward proposal to Illinois State University. Please complete this form and send all required documents and certifications to the following email address:

_____@ilstu.edu

ILLINOIS STATE UNIVERSITY INFORMATION

Principal Investigator (First and Last Name)

Proposal Number

Proposal Title

Prime Sponsor's Name

SUBRECIPIENT INFORMATION

Subrecipient Organization

Subrecipient Principal Investigator (First and Last Name)

Subrecipient Principal Investigator Email

Subrecipient Contact Name (First and Last Name)

Subrecipient Contact Email

Data Universal Numbering Systems (DUNS)

Unique Entity Identifier (UEI) Number

Employer Identification Number (EIN)

Federal Congressional District

Subrecipient Period of Performance Begins (MM/DD/YYYY)

Subrecipient Period of Performance Ends (MM/DD/YYYY)

Subrecipient Award Amount (\$00,000.00)

Subrecipient Match Amount (\$00,000.00)

ATTACHMENTS

The following documents are included in the subrecipient organization proposal submission and are in compliance with the prime sponsor's guidelines linked below:

Proposal Guidelines Link

Budget (Required)

Collaboration Letter

Budget Justification (Required)

Principal Investigator Biosketch

Scope of Work (Required)

Other: _____

AUDIT

Does subrecipient organization receive a single audit in accordance with Uniform Guidance §200.514?

Yes

No

N/A

Does the above-mentioned audit contain:

No material instances of non-compliance, material weakness and/or reportable conditions.

Material instances of non-compliance, material weakness and/or reportable conditions.

Attach a copy of most recent audit or provide a URL link.

URL: _____

CONFLICT OF INTEREST

Subrecipient organization hereby certifies that it has an active and enforced conflict of interest policy that is consistent with the provisions of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research."

Subrecipient organization certifies that to the best of its knowledge, all financial disclosures have been made related to the activities that may be funded by or will have been satisfactorily managed, reduced, or eliminated in accordance with Subrecipient's conflict of interest policy prior to the expenditure of any funds under any resultant agreement.

Subrecipient organization does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by ISU's policy and related procedures. See policy: <https://policy.illinoisstate.edu/fiscal/7-1-1.shtml>

Not applicable: Project is not being funded by Public Health Services (PHS), National Science Foundation (NSF), or other sponsor that has adopted the federal financial disclosure requirements.

DEBARMENT AND SUSPENSION INFORMATION:

Has subrecipient organization, principal investigator and/or any employee on this project within the last 3 years been debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in any federal department or agency or delinquent on repayment of any federal debt including direct and guaranteed loans and other debt as defined in Uniform Guidance?

Yes

No

FACILITIES AND ADMINISTRATIVE (F&A) RATE FOR THIS PROPOSAL:

Subrecipient organization facilities and administrative rate is _____% for this proposal and is:

Federally Negotiated

De Minimis Rate

Other (e.g., limited by prime sponsor)

Attach a copy of rate agreement or provide a URL link.

URL: _____

REGULATORY COMPLIANCES

Does the work on this project involve:

Animal subjects

Biological hazards, chemicals, lasers, neurotoxins, and/or radiation

Human subjects

International collaborations and/or travel

If any of the above are checked please attach all proper protocols and/or approval.

RESPONSIBLE CONDUCT OF RESEARCH

For National Science Foundation (NSF) or United States Department of Agriculture-National Institute of Food and Agriculture (USDA-NIFA) sponsors only. Check all that apply.

- NSF: Subrecipient hereby certifies that it will ensure that all undergraduates, graduate students, and post-doctoral researchers who will be supported by the NSF proposal will be trained on the oversight in the responsible and ethical conduct of research.
- USDA-NIFA: Subrecipient hereby certifies that it has an institutional plan compliant with USDA-NIFA’s February 2013 Agency-Specific Terms and Conditions Requirements related to responsible conduct of research.

AUTHORIZED REPRESENTATIVE SIGNATURE

The information, certifications and representations above have been read, signed, and made by an authorized official of the subrecipient organization named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency 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 the execution of a subaward agreement are at the Subrecipient’s own risk. No work involving human subjects and/or animals may begin until the subrecipient has obtained registered Institutional Review Board (IRB) and/or Intutional Animal Care and Use Committee (IACUC) review and approval

Signature of Subrecipient’s Authorized Official

Date

Printed Name of Subrecipient’s Authorized Official

Printed Title of Subrecipient’s Authorized Official

FOR ILLINOIS STATE UNIVERISTY ADMINISTATIVE USE ONLY

Is subrecipient form completed in its entirety?

- Yes
- No*

Reason for omissions: _____

Are any risk factors identified?

- Yes*
- No

Risk factors: _____

Recommendation to approve subrecipient?

- Yes, with standard monitoring
- Yes, with additional monitoring regarding*: _____
- No, due to*: _____

Name of primary reviewing party

Date

Name of secondary reviewing party
(Only necessary if any of the above responses with an * are marked)

Date