

SUBRECIPIENT COMMITMENT FORM

Reset form

SPO#:

INSTITUTION/ENTITY			PROJECT	
Legal Name and Address (as registered in SAM.gov) University of Guam College of Natural of Applied Sciences UOG Station Mangilao, Guam 96923-0303 Zip+4 Congressional District:			Address where research will be performed <input checked="" type="checkbox"/> Same as legal address Zip+4 Congressional District:	
DUNS Number: 779908151	EIN: 98-0032933	UEI Number:	UCD Principal Investigator	
			Last	First
Registered in SAM? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Subrecipient must have a current SAM registration and maintain their current information in SAM prior to issuance of a Subaward.</i>			Subrecipient Principal Investigator	
			Last Moore	First Aubrey
Type of Organization: US Non-profit/University			Subaward Period of Performance -	Amount Requested 60000
Prime Sponsor				
Project Title Western Plant Diagnostic Network (WPDN)				

PROPOSAL COMPONENTS

The following documents are included in our proposal submission and covered by the certifications below:

Required Components

<input type="checkbox"/> Scope of work	<input type="button" value="Attach SOW"/>
<input type="checkbox"/> Detailed budget	<input type="button" value="Attach Budget"/>
<input type="checkbox"/> Budget justification	<input type="button" value="Attach Justification"/>

As applicable per sponsor requirements

<input type="checkbox"/> Key Personnel Biosketches	<input type="button" value="Attach Biosketch"/>	<input type="checkbox"/> Other _____	<input type="button" value="Attach Other Docs"/>
<input type="checkbox"/> Current & Pending Support	<input type="button" value="Attach Support"/>		<input type="button" value="Attach Other Docs"/>

A. TECHNICAL INFORMATION

1. SUBRECIPIENT CLASSIFICATION

The requirements and responsibilities of UCD's Subrecipients are different from those of a contractor/vendor.

Subrecipient	Contractor/Vendor
<ul style="list-style-type: none"> Responsible for significant programmatic decision-making Responsible for adherence to applicable sponsor program compliance requirements Uses sponsor funds to carry out a Scope of Work for UCD Statement of work may result in intellectual property or publishable results 	<ul style="list-style-type: none"> Provides goods and services within normal business operations Provides similar goods or services to other customers Provides goods or services that are ancillary to UCD's sponsored project Is not subject to compliance requirements of UCD's sponsor

☐ Yes ☐ No Our organization is properly categorized as a subrecipient based on our scope of work. If "No", please contact the UCD PI about procuring your organization's products and services as a vendor/contractor.

2. COMPLIANCE

Our scope of work includes:

<input type="checkbox"/> Human Subjects	Approval Date: _____	<input type="checkbox"/> Pending	<input type="button" value="Attach IRB Approval"/>
<input type="checkbox"/> Human Stem Cells	Approval Date: _____	<input type="checkbox"/> Pending	<input type="button" value="Attach Stem Cell Approval"/>
<input type="checkbox"/> Animal Subjects	Approval Date: _____	<input type="checkbox"/> Pending	<input type="button" value="Attach IACUC Approval"/>

Subrecipient's IRB and/or IACUC approval must be provided to UCD's Office of Sponsored Program when available.

☐ Yes ☐ No If human subjects are involved, have all key personnel completed Human Subjects Training?

B. BUDGET INFORMATION

1. FACILITIES AND ADMINISTRATIVE RATES

- ☐ We have applied our federally-negotiated F&A rates. Our negotiated rate agreement is:
- ☐ Attached ☐ Available at: [enter website]
- ☐ We do not have a federally-negotiated rate but have applied:
- ☐ a negotiated F&A rate with UCD with the attached documentation substantiating the rate.
- ☐ 10% de minimus rate (allowable only if subrecipient does not have a federally negotiated F&A rate); MTDC definition, see §200.68 Modified Total Direct Cost
- ☐ We have applied other rates as required by the prime sponsor policies/guidelines.

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2. FRINGE BENEFIT RATES

- ☐ We have applied rates consistent with or lower than our federally-negotiated rates. Our negotiated rate agreement is:
- ☐ Attached ☐ Available at:
- ☐ We do not have a federally-negotiated rate and have applied actual fringe benefits (specify the benefit categories below).
- ☐ We have applied other rates (specify the basis on which rates have been calculated, including elements used in calculation, below).

3. COST-SHARING

- ☐ Yes ☐ No Amount: Cost sharing amounts and justification should be included in the subrecipient's budget.

C. CERTIFICATIONS

1. CONFLICT OF INTEREST (COI) Select one:

- ☒ Not applicable because this project is not being funded by PHS (NIH, CDC, AHRQ, etc.), or any other sponsor that has adopted the federal financial disclosure requirements (NSF, etc.).
- ☐ We are registered as an organization with a PHS compliant policy with the FDP Clearinghouse. UCD encourages you to list your organization on the FDP Clearinghouse. You can register at http://sites.nationalacademies.org/PGA/fdp/PGA_070596.
- ☐ Subrecipient Organization/Institution certifies that it **does have**:
- an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F **and/or** an NSF compliant Financial Conflict of Interest Policy in place (NSF Proposals & Award Policies & Procedures Guide, Part II, Award & Administration Guide Section IV.A).
- Subrecipient Organization/Institution **does not** have a compliant COI policy and therefore will abide by:
- ☐ 1) For PHS, UC Davis' policy for Public Health Services Regulations on Objectivity in Research Policy #230-07, "Investigators" are defined by PHS to include principal investigators and any other individual who, regardless of title or position, has responsibility for the design, conduct, or reporting of such covered research. Each "investigator" has completed (and attached hereto) the PHS financial disclosure form. Further, each investigator has also completed the required UC COI-PHS Training or
- ☐ 2) For NSF, UC Davis' Individual Conflicts of Interest Involving Research Policy #230-05. Each "investigator" listed on the proposal has completed (and has attached hereto) the NSF financial disclosure form.

By signing below, Subrecipient certifies that the required training will be completed by each investigator prior to engaging in any research related to any PHS funded contract/grant.

2. DEBARMENT AND SUSPENSION Answer all

- Subrecipient, the PI or any other employee or student participating in this project ☐ are* / ☐ are not debarred, suspended, proposed for debarment, declared ineligible, or otherwise excluded from or ineligible for participation in federal assistance programs, federal contracts, or activities.
- Subrecipient, the PI or any other employee or student participating in this project ☐ are* / ☐ are not presently indicted for, or otherwise criminally or civilly charged by a government entity.
- Subrecipient ☐ has* / ☐ has 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 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.
- Subrecipient ☐ has* / ☐ has not within three (3) years preceding this offer, had any contract terminated for default by any federal agency.
- * If checked, explain below.

D. AUDIT STATUS

- ☐ Yes, subrecipient received an annual audit in accordance with the Single Audit Act or Uniform Guidance Subpart F.
- ☐ No, Subrecipient DOES NOT receive an annual audit in accordance with Single Audit Act or Uniform Guidance Subpart F because subrecipient is a: **If NO, complete and attach a Mini-Audit Questionnaire. A limited-scope audit may be required before a subaward can be issued.**

COMMENTS

APPROVED FOR SUBRECIPIENT

The information, certifications and representations above have been read, signed and made by an authorized official of the Subrecipient named. The appropriate programmatic and administrative personnel involved in this application are aware of agency policy regarding 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 subaward agreement are at the Subrecipient's own risk.**

 Signature of Authorized Institutional Official	 Date	Name and Title of Authorized Official Dr. Lee S. Yudin Dean/Director, CNAS	
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