

University of South Florida Research &  
 Innovation Sponsored Research  
 3702 Spectrum Blvd., Suite 165  
 Tampa, FL 33612

USF Internal Use Only	
Proposal Deadline	_____
Date of Receipt	_____
Approved as Subrecipient	_____

### Subrecipient Information and Compliance Certification Form for FDP Expanded Clearinghouse Participants ONLY

Subrecipients, as defined in section B below, who anticipate receiving pass-through funding from the University of South Florida under a federal or non-federal award must complete this form prior to execution of a subagreement.

#### SECTION A—Prime Proposal Information

**USF Principal Investigator:** \_\_\_\_\_

**Prime Project Title:** \_\_\_\_\_

**Prime Sponsor:** \_\_\_\_\_

**Award Identification No.:** \_\_\_\_\_

#### SECTION B—Classification Verification

Before submitting this form for USF’s review, please ensure that your entity fits the characteristics of a *subrecipient* rather than a *vendor or subcontractor* as illustrated in the table below. Please check all that apply.

Subrecipient	Contractor/Vendor
<input type="checkbox"/> Performance represents an intellectually significant portion of the overall programmatic effort and is measured against the objectives of the program	<input type="checkbox"/> Provides goods or services that are ancillary to the operation of the state or Federal program
<input type="checkbox"/> Will use sponsor’s funds to carry out a program for a public purpose, as opposed to providing goods or services for the benefit of USF	<input type="checkbox"/> Provides the goods or services purchased with State or Federal funds within normal business operations
<input type="checkbox"/> Is responsible for adhering to applicable program requirements specified in the award	<input type="checkbox"/> Provides similar goods or services to many different purchasers
<input type="checkbox"/> There is an identified principal investigator for the subrecipient who has responsibility for making programmatic decisions	<input type="checkbox"/> Is not subject to the compliance requirements of the sponsored program as a result of the agreement with USF
	<input type="checkbox"/> Normally operates in a competitive environment

For the purpose of this proposal, my organization is categorized properly as a subrecipient as described above thereby making it subject to the prime proposal’s terms and conditions.  YES  NO

**If your institution does not meet the criteria outlined above for a subrecipient or if you are unsure, please contact the USF PI about procuring your organization’s products and services as a contractor PRIOR to completing the remainder of the form.**

**SECTION C—General Subaward Information**

**Subrecipient's Legal Name (must match registered name in SAM):**

\_\_\_\_\_

**Subrecipient's UEI Number:**

\_\_\_\_\_

**Subrecipient's PI's Name:**

\_\_\_\_\_

**Performance Site Address:**

\_\_\_\_\_

**Phone:** \_\_\_\_\_

\_\_\_\_\_

**Email:** \_\_\_\_\_

\_\_\_\_\_

**Facsimile:** \_\_\_\_\_

\_\_\_\_\_

**Amount of Subaward: \$** \_\_\_\_\_ **Direct Costs: \$** \_\_\_\_\_ **Subaward Period:** \_\_\_\_\_

**Subaward Payment Mechanism:**

**Cost-Reimbursable**

**Fixed-Price**

**Fixed-Rate**

**Maturity of Subrecipient's Accounting System and Accounting Staff:**

**≥ Five (5) Years**

**≤ Five (5) Years**

**SECTION D—Project-specific Review and Certifications**

1. **Does the subaward involve Human Subjects?** YES  NO

a. **Is the study EXEMPT?** YES  NO  Exemption Category \_\_\_\_\_

If YES, documentation of IRB approval is required.

b. **Have all key personnel completed human subjects' training at the subrecipient's institution?**

YES  NO

Note: If you do not have a current FWA number on file with FDP's repository, you will need to provide the information to USF before the subaward will be issued. If you plan to rely on the review and approval of the USF IRB, please provide a copy of the fully executed IRB Authorization Agreement or Individual Investigator Agreement. If you do not yet have one, please contact the USF IRB Office at 813-974-5638 or via email at [rsch-arc@usf.edu](mailto:rsch-arc@usf.edu) for further instructions.

2. **Does the subaward involve Animal Subjects?** YES  NO

If YES, please provide documentation of IACUC approval and Memorandum of Understanding as necessary.

Note: If you do not have a current AWA number on file with FDP's repository, you will need to provide the information to USF before any subaward will be issued.

3. **Does the subaward involve Recombinant DNA, Infectious agents, Biological toxins, Select agents/toxins or other biologic?** YES  NO

If YES, a copy of your Institutional Biosafety Committee approval may be required.

4. **Does the subaward involve the use of radioactive isotopes?** YES  NO

If YES, contact the USF Radiation Safety Officer at (813) 974-1194.

5. **Does the subaward involve the use of any Class 3b or 4 lasers?** YES  NO

If YES, contact the USF Radiation Safety Officer at (813) 974-1194.

6. **Does the subaward involve the use of Stem Cells?** YES  NO

If YES, a copy of the relevant review committee approval may be required.

7. **Does the subaward involve Large Scale Human or Non-Human Genomic Data which will be submitted to dbGaP?** YES  NO

Note: For applicability, please refer to the full policy at <http://gds.nih.gov/03policy2.html>.

If YES, Subrecipient's large scale human genomic data which will be submitted to dbGaP. Documentation of an approved consent form and an Institutional Certification will be required prior to the award, at the "Just in Time" stage.

*or*

If YES, Subrecipient's project, although funded by NIH and involving generation of large scale human genomic data, will not be submitted to dbGaP. Provide clarification in Section F.

8. **Financial Conflict of Interest – National Science Foundation (NSF)**

**Is the subaward funded by NSF, does it include NSF flow-through or does it involve a sponsor following NSF's Grantee Standards for financial conflicts of interest?** YES  NO

If YES, Subrecipient organization/institution has an active and enforced policy on financial conflicts of interest consistent with the provision of NSF's Proposal & Award Policies & Procedures Guide (PAPPG).

*or*

If YES and Subrecipient does not have an active and/or enforced conflict of interest policy consistent with the NSF's PAPPG, Subrecipient hereby agrees to abide by USF's COI policy.

To view USF's COI policy, please visit <http://regulationspolicies.usf.edu/policies-and-procedures/pdfs/policy-0-309.pdf> or <http://www.research.usf.edu/dric/>.

9. **Responsible Conduct in Research (RCR) Training**

Note: Applicable to projects funded by NIH and NSF or any other programs requiring Responsible Conduct in Research Training.

Not applicable because this subaward is not being funded by NIH or NSF or any other programs requiring RCR Training. Please note that RCR training is only required by NIH for specific awards. For more information, please see <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-10-019.html>.

Subrecipient organization/institution hereby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by this NIH or NSF proposal will be trained on the oversight in the responsible and ethical conduct of research.

10. **Cost Sharing**      YES     NO

If **YES**, explanation of Cost Sharing sources *must* be included in the subrecipient's budget. Please note that an annual verification of cost share commitment will be required.

If **YES** and federal funding is involved, cost sharing commitment must be in accordance with 2 CFR §200.306.

11. **Is this subaward subject to Export Control requirements?**      YES     NO

If **YES**, subrecipient certifies that an Export Control Officer or other authorized person has reviewed the subrecipient's proposal for adherence with Federal Export Control laws and procedures. Subrecipient and/or Institution will be individually responsible for ensuring compliance with applicable Federal Export laws and procedures as outlined in the subcontract.

**AUTHORIZED INSTITUTIONAL APPROVAL**

By signing below, I certify that the appropriate programmatic and administrative personnel involved in this project are aware of agency policies 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 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 and/or Animal Care and Use Committee review and approval.**

\_\_\_\_\_  
Signature of Subrecipient's Authorized Institutional Official

\_\_\_\_\_  
Name of Subrecipient's Authorized Institutional Official

\_\_\_\_\_  
Date