

University of South Florida Research & Innovation
 Sponsored Research
 4019 E. Fowler Avenue, Suite 100
 Tampa, FL 33617

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

SUBRECIPIENT COMMITMENT FORM

All existing and potential subrecipients who anticipate funding under a federal or non-federal award must complete this form when submitting a proposal to the University of South Florida (USF). Additional information will be required from the sub recipient if the prime award is funded.

Section A: Prime Proposal Information	
Sponsor: Proposal Title: RFA/RFP/PAR Number: Federal Award Identification Number (FAIN):	USF's PI: Anticipated Prime Award Instrument: <input type="checkbox"/> Grant/Cooperative Agreement <input type="checkbox"/> Federal or Non-Federal subaward
Section B: Subrecipient Information	
Subrecipient's Legal Name (must match registered name in DUNS): Address: DUNS #: EIN #: Congressional District:	Subrecipient's PI: Address: Phone: Facsimile: Email:
Subrecipient's Financial Contact: Address: Phone: Facsimile: Email:	Subrecipient's Authorized Official: Address: Phone: Facsimile: Email:

Type of Organization:

- Large Business Small Business Institution of Higher Education Alaska Native Corporation
 Historic Black College or University Minority Institution Other: _____
 For-Profit Non-Profit Not-for-Profit Domestic Foreign

Financial Conflict of Interest (FCOI) policy complies with PHS and/or NSF requirements YES NO
If NO, agrees to abide by USF's FCOI policy at <http://regulationspolicies.usf.edu/policies-and-procedures/pdfs/policy-0-309.pdf>. YES NO

Section C: Subaward Information

- Fixed Price Subaward Cost-Reimbursable Subaward New Subrecipient Existing Subrecipient
Total Amount of Subaward: \$ _____ Performance Period: _____
Human Subjects YES NO Animal Subjects YES NO Export Control YES NO
Facilities & Administrative Rates Applicable YES NO Rate: Base:
Fringe Benefit Rates Applicable YES NO Rate: Cost Sharing YES NO

Section D: Proposal Documents

The following documents are included in our subaward proposal submission:

- Statement of Work (Required) Budget and Budget Justification (Required)
 Small/Small Disadvantaged Business Subcontracting Plan, in agency-required format (if required by prime sponsor)
 Biosketches Other: _____

Certification by Subrecipient's Authorized Institutional Representative

By signing below, I certify that I understand that 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/Title of Subrecipient's Authorized Institutional Representative Date