

University of California, Davis (UCD) requires completion of the *Subrecipient Commitment Form* for all proposed subrecipients at the time of proposal submission to the prime sponsor, subrecipient agreements cannot be fully executed without a complete and up-to-date form.

Please download and complete the fillable PDF form and attach all required documents directly to this PDF file. As you complete the form, note the following:



Download the file to your desktop before starting. Do not complete this form on your browser as the required documents may not attach appropriately.



After you have attached documents to the PDF, you can view, delete or save them by clicking the paperclip icon on the left side navigation of the PDF;



Use the Save icon to save the PDF as a fillable file. Please do not “print to PDF” or scan a hard copy of the form; and



Electronic signatures are preferred. If you need to print a hard copy to sign, please upload a scanned copy of the signature page to this file where indicated.

If you have any question about completing this form, contact the UCD Sponsored Programs via email, send to [subawards@ucdavis.edu](mailto:subawards@ucdavis.edu). Thank you.

INSTITUTION/ENTITY		PROJECT	
Legal Name and Address (as registered in SAM.gov)		Address where research will be performed Same as legal address	
Zip+4 Congressional District:		Zip+4 Congressional District:	
UEI Number:	EIN:	UCD Principal Investigator	
		Last	First
Registered in SAM? Yes 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	First
Type of Organization:		Subaward Period of Performance	Amount Requested
Prime Sponsor		-	
Project Title			

**PROPOSAL COMPONENTS**

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

Required Components	As applicable per sponsor requirements
Scope of work	Key Personnel Biosketches
Detailed budget	Current & Pending Support
Budget justification	Other _____

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

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:

Human Subjects	Approval Date: _____	Pending
Human Stem Cells	Approval Date: _____	Pending
Animal Subjects	Approval Date: _____	Pending

*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:

We do not have a federally-negotiated rate but have applied the 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.

**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](http://fdp.clearinghouse.gov). UCD encourages you to list your organization on the FDP Clearinghouse. You can register at [http://sites.nationalacademies.org/PGA/fdp/PGA\\_070596](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.**

	<b>Name and Title of Authorized Official</b>		
	<b>Email</b>	<b>Phone</b>	
<b>Signature of Authorized Institutional Official</b>	<b>Date</b>		