THE UNIVERSITY OF TEXAS AT ARLINGTON

Subrecipient Commitment Form
Research Administration
Office of Grant and Contract Services

I. General Information

UTA PI _____ UTA PI Dept _____

Prime Sponsor _____

Proposal Title _____

Performance Start Date _____ Performance End Date _____

II. Subrecipient Information

Subrecipient Legal Name (As registered in SAM) _____

EIN _____ UEI _____ Congressional District _____
Of Performance Site

Performance Site _____
Street Address City State Country Zip + 4

III. Subrecipient PI

Name _____

Phone _____

Email _____

IV. Subrecipient Administrative Contact

Name _____

Phone _____

Email _____

V. Budget Information – Explanation of Cost Sharing must be included in budget & verified annually.

Direct Costs _____ **Indirect Costs** _____ **Total Costs** _____ **Cost Share Amount** _____

Facilities and Administrative Rates

☐ Federally Negotiated Rate Agreement URL:

_____

☐ Sponsor Limited F&A Rate

☐ 10% De Minimus

☐ Not Requested

☐ Other: Explain in Comments on p.4

Fringe Benefits

☐ Federally Negotiated Rate Agreement URL:

_____

☐ Other rates (include explanation or link):

_____

☐ Not Requested

Cost Sharing

☐ Required (Must be tracked & reported)

☐ Not Required (If voluntarily committed, must be tracked & reported)

☐ Not Applicable

If federal funding is involved, must be in accordance with 2 CFR § 200.306.

VI. Compliance Information – IRB/IACUC approval required before subaward issued (send to preaward@uta.edu).

Human Subjects ☐ Yes ☐ No

☐ Human Subjects Approval Pending

IRB Approval Date _____

Human Embryonic Stem Cells

☐ Yes ☐ No

Approval _____

Export Control ☐ Yes ☐ No

TCP Approval Date _____

Recombinant DNA ☐ Yes ☐ No (IBC)

Approval _____

Select Agents ☐ Yes ☐ No

Approval _____

Animal Subjects ☐ Yes ☐ No

☐ IACUC Approval Pending

IACUC Approval Date

_____

Will Human Subject Data Be Exchanged? ☐ Yes ☐ No

Data will be shared None

Data to be shared None

Explain Other Human Subject data to be shared:

VII. Proposal Documents Included with this Form

☐ Statement of Work
☐ Budget
☐ Budget Justification
☐ Biosketches for All Key Personnel
☐ Letter of Commitment/Collaboration
☐ Official Rate Documents (e.g., NICRA)
☐ Other:

VIII. Federal Demonstration Partnership (FDP) Members

☐ YES ☐ NO **If yes, go to XV. Subrecipient Requirements and Responsibilities**

IX. Subrecipient Institutional Information

Institution Location
☐ US Based
☐ Non-US Based

Institution Type
☐ Educational
☐ MSI
☐ Large Business
☐ Small Business
☐ Small Disadvantaged Business
☐ Non-profit

Experience Level
☐ First time as a subrecipient organization
☐ Subrecipient organization has/has had federal funding

Experience with Federal Funding
☐ Less than 1 year
☐ Limited (1-4 years)
☐ Intermediate (5-9 years)
☐ Advanced (10+ years)

X. Registrations

Subrecipient currently registered in the System for Award Management (SAM)? ☐ YES ☐ NO

SAM Expiration Date: _____

If NO and IF the overall sponsor is prime federal, Subrecipients must register with SAM.gov to obtain a Universal Entity Identifier (UEI).

XI. Financial Conflict of Interest and Ethics

Financial Conflict of Interest (FCOI)

☐ Subrecipient Organization/Institution certifies that it has an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research" and 45 CFR Part 94 "Responsible Prospective Contractors." Subrecipient also certifies that, to the best of Institution's knowledge, (1) all financial disclosures will be made related to the activities that may be funded by or through a resulting agreement, and required by its conflict of interest policy, and (2) all identified conflicts of interest have 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 and within a timely manner sufficient to enable timely FCOI reporting.

☐ Subrecipient does not have an active and/or enforced conflict of interest policy as described above and hereby agrees to abide by UT Arlington's Policy for Disclosure, Management, and Reporting of Conflicts of Interest in Research at: https://policy.uta.edu/doctract/documentportal/08D885C804E4E8E612AA2F247DDE620D and Investigator requirements at https://resources.uta.edu/research/regulatory-services/conflict-of-interest/conflict-of-interest-process-for-phs-ubrecipients-and-collaborators.php. "Investigator" is defined as any person responsible for the design, conduct, or reporting of research.

☐ If PHS funded (NIH, etc.), Subrecipient certifies that the required FCOI training will be completed by each investigator prior to engaging in any research related to any PHS funded contract/grant.

Responsible Conduct of Research (RCR) Training (NSF and NIH)

☐ Subrecipient organization/institution hereby certifies that it will ensure that all undergraduates, graduate students, postdoctoral researchers, faculty, and other senior personnel who will be supported by this proposal will be trained on the responsible and ethical conduct of research (RCR).

XII. Debarment or Suspension History

☐ Yes ☐ No Has Subrecipient organization had a contract, grant and/or agreement terminated for cause or material breach?

☐ Yes ☐ No Is the PI or any other employee or student participating in this project, debarred, suspended, or otherwise excluded from or ineligible for participation in federal assistance programs or activities?

If No, the Organization certifies that they:

☐ ARE ☐ ARE NOT presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal contracts.

☐ ARE ☐ ARE NOT presently indicted for, or otherwise criminally or civilly charged by a government agency.

☐ HAVE ☐ HAVE NOT within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency.

☐ HAVE ☐ HAVE 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 commissions of 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.

XIII. Audit Status

☐ Yes ☐ No Was the Subrecipient required to conduct an annual audit in accordance with the Single Audit Act or Uniform Guidance 2 CRF §200.501 for the most recent Audit year? If YES, Attach a complete copy of Subrecipient's most recent Single Audit report OR provide the URL for a complete copy _____

Most recent fiscal year completed _____FY end date _____

☐ Yes ☐ No Were there any audit findings reported?

Submit report that describes the findings. Summarize below the steps taken to correct the findings and an update on the corrective action taken on the findings:

XIV. Fiscal Responsibility

The Subrecipient certifies:

☐ Yes ☐ No financial system is in accordance with generally accepted accounting principles.

☐ Yes ☐ No financial system has the capability to identify, in its accounts, all federal awards received and expended, and the federal programs under which they were received.

☐ Yes ☐ No maintains internal controls to assure that it is managing federal awards in compliance with applicable laws, regulations and the provision of contracts, grants, and agreements.

☐ Yes ☐ No and its financial system comply with applicable laws and regulations.

☐ Yes ☐ No can prepare appropriate financial statements, including the schedule of expenditures of federal awards and invoices for reimbursement.

XV. Subrecipient Requirements and Responsibilities

Before submitting a sub award proposal, the Subrecipient must verify that it fits the characteristics of a Subrecipient, rather than those of a contractor. The following chart outlines the differences. Please check all that apply.

Subrecipient	Contractor
☐ Performance represents an intellectually significant portion of overall programmatic effort & is measured against objectives of the program ☐ Use of funds is for a public purpose, as opposed to providing goods or services for the benefit of UT Arlington ☐ Responsible for adhering to applicable program requirements outlined in the terms and conditions negotiated upon award ☐ An identified principal investigator (PI) for the Subrecipient who has responsibility for making programmatic decision	☐ Provides goods or services that are ancillary to the operation of the program identified in the prime award ☐ Provides the goods or services purchased with the funds within normal business operations ☐ Provides similar goods or services to many different purchasers ☐ Is not subject to the compliance requirements of the program as a result of the agreement with UT Arlington ☐ Normally operates in a competitive environment

For the purpose of this proposal, my organization is properly categorized as a Subrecipient as described above. ☐ YES ☐ NO
If "No," please contact the UTA PI about procuring your organization's products and services as a contractor.

XVI. Comments

XVII. Certification of Authorized Official Representative and Organization Certification

In signing below and offering to participate in this research program, the Subrecipient Institution certifies that neither they nor their principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from receiving funds from any federal department or agency and are not delinquent on any federal debt; they are in compliance with the Drug Free Workplace Act of 1988; they are in compliance with U.S. Code, Section 1352, restrictions on the use of federal funds for the purpose of lobbying; they have filed annually with the Office of Scientific Integrity a PHS form 6349 governing Misconduct in Science; they have filed with DHHS compliance offices certification forms governing Civil Rights (441), Handicapped Individuals (641), Sex Discrimination (639-A), and Age Discrimination (680); they are in compliance with PHS policy governing Program Income; they have established policies in compliance with 45 CFR Part 46, Subpart A (protection of human subjects); the Animal Welfare Act (PL-89-544 as amended) and the Health Research Exchange Act of 1985 (Public Law 99-158); and that they are in compliance with NIH guidelines regarding human pluripotent stem cell research, transplantation of fetal tissue, recombinant DNA and human gene transfer research, and inclusion of women, children & minorities in research.

This proposal has been reviewed and approved by the appropriate official(s) of Subrecipient and certified to its accuracy and completeness. The appropriate programmatic and administrative personnel of Subrecipient involved in this application are aware of the prime awarding agency's policies, agree to accept the obligation to comply with award terms, conditions, and certifications, and is prepared to establish the necessary inter-institutional agreement consistent with that policy. Any terms or rates included in the proposal described herein are not binding upon the Pass-Though Entity. All terms and conditions between the parties will be outlined in a separate formal Agreement.

I certify that my organization is correctly categorized as a Subrecipient and is not a contractor. The appropriate programmatic and administrative personnel involved in this application are aware or prime agency policy regarding subawards and are prepared to establish the necessary subaward consistent with those policies. The information provided in our proposal and on this form is true and correct, and my organization will honor any commitments made in our proposal. I am the authorized official representative of the Subrecipient named herein, and I have the authority to legally bind my organization in grants administration matters. I understand that: (a) any work we begin and/or expenses we incur related to our proposal prior to full execution of a subaward agreement will be at my organization's own risk, and (b) no work involving human subjects and/or animals may begin until my organization has obtained registered Institutional Review Board and/or Animal Care and Use Committee review and approval.

_____	_____
Signature of Authorized Institutional Representative	Date
_____	_____
Name of Authorized Institutional Representative	Title