



THE UNIVERSITY OF  
**TENNESSEE**  
KNOXVILLE

RESEARCH, INNOVATION &  
ECONOMIC DEVELOPMENT

## Subrecipient Information and Commitment Form

Subrecipients must complete this form when submitting a proposal to the University of Tennessee Knoxville. This form provides a checklist of documents that must be provided by the subrecipient's Office of Research or equivalent and (for institutions not in the FDP Clearinghouse) requires an authorized organizational representative's signature.

### Project Information

Proposal Title:

University of Tennessee PI:

Sub PI Name:

Cayuse Proposal #:

Place of Performance Address:

City, State, and Zip Code + 4:

Congressional District:

Anticipated Project Dates:

Anticipated Subaward Amount:

Cost Share (if applicable):

Cost Share Amount:

Human Subjects?    No    Yes    Human Subjects Assurance (if applicable)#:

Animal Subjects?    No    Yes    Animal Subjects Assurance (if applicable)#:

### Documentation

Documents to be submitted by subrecipient Office of Research (or equivalent) with this form:

- |   |  |
|---|--|
| <input type="checkbox"/> Statement of Work            | <input type="checkbox"/> Biographical Sketch                     |
| <input type="checkbox"/> Budget                       | <input type="checkbox"/> Current & Pending (other support forms) |
| <input type="checkbox"/> Budget Justification         | <input type="checkbox"/> Facilities Statement                    |
| <input type="checkbox"/> Indirect Cost Rate Agreement | <input type="checkbox"/> Letter of Commitment                    |

## Subrecipient Information

Subrecipient Institution:

Institution Address:

City, State, Zip Code + 4:

UEI/DUNS #:

TIN/EIN:

F&A Rate:

Fringe Rate:

Does this application follow the PHS FCOI requirements? No Yes

If yes, please select one of the following options:

Subrecipient hereby 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." Subrecipient also certifies that, to the best of Subrecipient's knowledge, (1) all financial disclosures have been 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 expenditures of any funds under any resultant agreement.

Subrecipient does not have an active and/or enforced Conflict of Interest policy and hereby agrees to abide by UT's policy. [UT's policy is available online](#). Disclosures must be [submitted online](#).

## Sponsored Programs Contact

Sponsored Programs Contact:

Sponsored Programs Phone:

Sponsored Programs Email:

## Certification

By signing this form, I certify that the above information, certifications, and representations have been read, are understood, and are accurate and true to the best of my knowledge. The appropriate programmatic and administrative personnel involved in this application are aware of pertinent regulations and policies, and are prepared to establish a subaward agreement with The University of Tennessee that ensures compliance with such regulations and policies should this proposal be funded.

## Authorized Organizational Representative

Name and Title:

Date:

Signature (non-FDP institutions):