

## Subrecipient Information and Commitment Form

Subrecipients must complete this form when submitting a proposal to the University of Tennessee, Knoxville. Signature by an authorized organizational representative is required. This form provides a checklist of documents that must be provided by the subrecipient's Office of Research or equivalent. *FDP Subrecipient Clearinghouse members may complete the FDP LOI Template.*

### Subrecipient Information

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Subrecipient Institution:	Congressional District:	Project Period:
PI Name:	Total Subaward Amount:	Cost Share Amount:
Institution Address (Street, City, St, Zip+4)	F&A Rate:	Fringe Benefit Rate(s):
Primary Performance Address (Street, City, St, Zip +4)	UEI Number:	TIN/EIN:

Does this application have a Conflict of Interest/Commitment review or compliance requirement? If yes, please select one of the following options:

Subrecipient hereby certifies that it has an active and enforced conflict of interest policy that meets the requirement of the prime sponsor.

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 should be submitted to the [Division of Research Integrity and Assurance.](#)

### Project Specific Questions

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Proposal Title:	UT PI:
Prime Sponsor:	Export Control concerns (if yes, describe):
UT Proposal #:	

Does this project involve:

Human Subjects Research?

No Yes

Human Subjects Assurance #:

Animal Subjects Research?

No Yes

Animal Subjects Assurance #

## Documentation

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

Statement of Work

Biographical Sketch

Budget

Current & Pending (other support forms)

Budget Justification

Facilities Statement

Indirect Cost Rate Agreement

Other Sponsor Specific Files:

Letter of Commitment

## Sponsored Programs Contact

Sponsored Programs Contact:

Sponsored Programs Phone:

Sponsored Programs Email:

## Certification

I certify the above information, certifications, and representations have been read, are understood, and are accurate and true to the best of my knowledge. 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. The appropriate programmatic and administrative personnel involved in this application are aware of the prime awarding agency's 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. Any terms or rates included in the proposal described herein are not binding upon the Pass-Through Entity. All terms and conditions between the parties will be outlined in a separate formal Agreement.

## Authorized Organizational Representative

Name and Title:

Signature:

Date: