



Office of Research Administration
SUBRECIPIENT COMMITMENT FORM

www.ora.umd.edu

supports and endorses this application to the University of Maryland College Park (UMD).

1. Project Title

2. UMD Principal Investigator

Name Email

3. Subrecipient Principal Investigator

Name Email

4. Subrecipient Administrative Contact

Name Email
 Title Phone

5. Subrecipient DUNS

6. Proposed Project Start Date **End Date**

7. Total Amount Requested (for all project periods) \$ (USD)

8. Cost Sharing/Matching/In-Kind included in the proposal (if applicable)

Cost sharing, matching, and/or in-kind commitments should be included in the subrecipient's budget and budget justification. Third-Party in-kind cost share should be supported by a letter of support signed by an authorized representative of the third part.

Yes Cash Amount \$ + In-Kind Amount \$ = Total Cost Share \$
 N/A

9. Primary Funding Source (select one) **US Federal sponsor** **Other**
 Prime Sponsor Name

10. The following documents are included in our subaward proposal submission (attached) and were prepared in compliance with the prime sponsor's solicitation guidelines:

Statement of Work	Detailed Budget	Approved F&A Rate Agreement
Budget Justification		
Other (please describe)		

11. For the attached **Statement of Work**, please indicate if the project will include any of the following:

- | | | | |
|---|-----|----|--|
| a. Human Subjects Research | Yes | No | |
| If yes and NON-FDP Institution, please provided your Federal Wide Assurance # | | | |
| b. Vertebrate Animal Research | Yes | No | |
| If yes and NON-FDP Institution, please provided your PHS Animal Welfare Assurance # | | | |
| c. Hazardous Materials | Yes | No | |
| If yes, is an institutional Hazardous Materials Management Plan in place? Yes No | | | |

12. Is the Subrecipient participating in the FDP Expanded Clearinghouse? (<https://fdpclearinghouse.org/organizations>)

Yes

No

If Yes, skip to item 16 - Signature Box. If No, complete items 13-15 below.

13. **Federal ID No. (TIN)** (US entity Only)

Type of Entity

Commercial/For Profit

Non-profit/educational/government

Is Subrecipient registered in SAM.gov?

Yes

No

14. **Facilities & Administrative (F&A) Rates** included in this proposal are based on:

Subrecipient has applied its federally-negotiated F&A rate for this type of work

A rate lower than Subrecipient's federally negotiated F&A rate, as required by the sponsor/program requirements

10% MTDC (de minimis rate) in accordance with 2 CFR 200 (Subrecipient has never had a federally-negotiated rate)

Other rate of % Base (dependent on specific award requirements)

Not applicable (no F&A costs are requested by Subrecipient)

15. **Conflict of Interest** (applicable to PHS, NSF, and USDA funded projects or agencies that have adopted the federal financial disclosure requirements)

Not applicable because this project is not being funded by PHS, NSF, USDA, or any other sponsor that has adopted the federal financial disclosure requirements. Check with UMD ORA or your Office of Sponsored Projects to determine if a sponsor has adopted the federal financial disclosure requirements.

Subrecipient hereby certifies that it has an active and enforced conflict of interest policy that is consistent with the provisions 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 their knowledge, all financial disclosures have been made related to the activities that may be funded by 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 agrees to adopt the University of Maryland's policy (<http://www.president.umd.edu/policies/ii310c.html>). Subrecipient will comply with all applicable Conflict of Interest regulations with funding from PHS, NSF, USDA, or any other sponsor that has adopted the federal disclosure requirements. For all PHS funded projects, Subrecipient will complete and sign the UMD FCOI form found here: <http://www.ora.umd.edu/sites/default/files/documents/forms/FCOIFormExtended.pdf>

16. **Signature Box.**

The appropriate programmatic and administrative personnel involved in this application are aware of applicable sponsor guidelines and policies and are prepared to enter into a Subrecipient Agreement consistent with the applicable flow-down requirements.

I hereby certify that neither _____ nor its principals are presently disbarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in this transaction by any U.S. Federal department or agency. To the best of my knowledge, the enclosed represents a true, complete, and accurate representation of work to be performed and costs to be incurred in the performance of the proposed project.

Authorized Organization Representative Signature

Date

Print AOR Name:

AOR Title: