



Office of Sponsored Programs

Subrecipient Information and Compliance

The completion of this form for all proposed subrecipients at the time of proposal submission to the prime sponsor. This form is required to be signed and dated by an Authorized Organizational Official from the Subrecipient Entity.

If you have any questions about completing this form or the proposal submission process, contact osp@esc.edu for assistance.

SUNY EMPIRE PROPOSAL INFORMATION	RF Award #
SUNY Empire Principal Investigator / Project Leader	Period of Performance
Prime Sponsor	Proposal Title

SUBRECIPIENT ENTITY (INSTITUTION)		PROJECT / PERFORMANCE SITE	
Legal Name and Address:		Physical address where the research/work on this project will be performed:	
Zip Code +4:	Congressional District:	Zip Code +4:	Congressional District:
DUNS Name, if different from Legal Name:		Subrecipient Principal Investigator / Project Leader (First and Last):	
DUNS Number:	Federal Employer Identification Number (EIN):	Subaward Performance Period:	Total Amount Funding Requested:
Type of Organization:	Will your work include Human Subjects: YES NO If Yes, have all key personnel at your site completed Human Subjects Training? YES NO <i>NOTE: Subrecipients IRB approval must be provided to SUNY Empire when available.</i>		
Point of Contact for subaward agreement if proposal is awarded by sponsor:			
NAICS Code applicable to this project:	Is your Entity registered on SAM.gov? NO YES If yes, Expiration Date:	Does your Institution have an active profile on the Federal Demonstration Partnership (FDP) Expanded Clearinghouse website: YES NO	
Select the appropriate business size classification and any applicable diversity information for your Institution:			
Large Business Concern (LBC)	Small Business Concern (SBC)		
Minority-Owned Business	Small Disadvantaged Business (SDB)	Veteran-Owned Business (VOSB)	HUBZone Small Business (HUB Zone)
(MBE) Woman-Owned Business (WBE)	Woman-Owned Small Business (WOSB)	Service Disabled Veteran-Owned Small Business (SVDOSB)	Alaskan Native Corporations (ANCs) & Indian Tribes
Historically Black Colleges/Universities & Minority Institutions			

SECTION A: PROPOSAL COMPONENTS

The following documents are required from your organization for this proposal submission and are covered by the certifications below:

Required for ALL proposals	Additional documents per sponsors requirements (as applicable, please list any documents not listed)	
<ul style="list-style-type: none"> Scope/Statement of Work (SOW) Detailed Budget Budget Justification 	<ul style="list-style-type: none"> Key Personnel Biosketches Current & Pending Support Federally approved Negotiated Indirect Cost Rate Agreement ("NICRA" or "F&A Agreement") 	



SECTION B: SUBRECIPIENT CLASSIFICATION

Your institution has been classified as a SUBRECIPIENT on this proposal. The requirements and responsibilities of a SUBRECIPIENT are different than those of a vendor.

SUBRECIPIENT REQUIREMENTS/RESPONSIBILITIES	VENDOR (CONTRACTOR) REQUIREMENTS/RESPONSIBILITIES
<ul style="list-style-type: none"> Responsible for a significant programmatic decision-making on the project over how the work will be performed/conducted Participates with SUNY Empire Project Staff in the design and/or conduct of the research project Responsible for adherence to all applicable sponsor program compliance requirements If sponsor is a federal agency, institution may be subject to annual audit and monitoring requirements under 2 CFR 200 Uses sponsor funds to carry out a scope/statement of work (SOW) on SUNY Empire's project Performance is measured against meeting the objectives of the project SUNY Empire has been funded to perform and shares in the responsibility for performance to the prime sponsor Key Personnel (i.e.: Co-Investigator, Project Leader) are identified and subject to the sponsors effort tracking and reporting requirements 	<ul style="list-style-type: none"> Provides goods and/or services within their normal business operations Provides similar goods and/or services to other customers Provides goods and/or services that are ancillary to SUNY Empire's sponsored project Is NOT subject to the compliance requirements of SUNY Empire's prime sponsor as the work is commercial in nature Has little or no independent decision-making involvement in the design and conduct of the research work being completed by SUNY Empire Commits to deliverable goods and/or services which, if not satisfactorily completed, may result in non-payment or replacement by the Vendor Person(s) conducting the work is not necessarily identified and not consider Key Personnel by the prime sponsor

Do you agree with our determination that you are a SUBRECIPIENT on this project based on the SOW you are agreeing to perform? Yes No

If you marked NO, please provide a justification:

SECTION C: COMPLAINE AND CERTIFICATIONS

1. Facilities and Administrative (F&A) rates applied to this proposal are based on:

We have used our current federally negotiated F&A rate.

F&A Rate Agreement will be provided Available at:

We do NOT have a federally negotiated F&A rate agreement and elected to use the 10.0% de minimis rate applied to our modified total direct costs (MTDC)

We have applied the rate as required by the prime sponsors policies/guidelines

Not applicable as no F&A are costs being requested by our organization

2. Fringe Benefits (FB) rates applied to this proposal are based on:

Rates applied are consistent with or lower than or federally negotiated FB rates.

F&A Rate Agreement will be provided Available at:

Other rate applied – specify the basis on which the rate has been calculated:

3. Financial Conflict of Interest (FCOI or COI) – Select one of the following:

Subrecipient hereby certifies it has implemented and is enforcing a written policy of financial conflict of interest compliant with the Public Health Service (PHS) provisions of 42 CFR Part 50, Subpart F and 45 CFR Part 94. All individuals responsible for the design, conduct or reporting of research for the proposal have made the required disclosures to the Subrecipient's institutional official in accordance with the Subrecipient's policy, and Subrecipient agrees to forward information about financial conflicts of interest to RAND for reporting to the PHS as required by the regulations.

Subrecipient hereby certifies it has implemented and is enforcing a written policy of financial conflict of interest compliant with the National Science Foundation's (NSF) policy on Conflict of Interest and all individuals responsible for the design, conduct or reporting of research for the proposal have made the required disclosures. All required reports and disclosures have been made to the Subrecipient's Institutional Official in accordance with the subrecipient's policy.

Subrecipient does not have an active and/or current written policy of financial conflict of interest that is compliant with PHS provisions of 42 CFR Part 50, Subpart F and 45 CFR Part 94, as applicable.

NOTE: SUNY Empire CITI Conflicts of Interest must be to be completed and returned for all Subrecipient Key Personnel. Failure to complete this task may result in your institutions exclusion from the proposal due to non-compliance.

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.



By signing, 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.

4. Debarment and Suspension – Check all applicable statement(s):

Subrecipient, the Principal Investigator (PI) or any other employee or student participating in this project 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 NOT presently indicted for, or otherwise criminally or civilly charged by a government entity.

Subrecipient, the PI or any other employee or student participating in this project HAS NOT within three (3) years preceding this offer, been convicted of or had a civil judgement 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) contractor 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, the PI or any other employee or student participating in this project HAS NOT within three (3) years preceding this offer, had any contract terminated for default by any federal agency.

If you are unable to check any of the boxes above, provide an explanation below:

SECTION D: COMMENTS

The information, certifications, and representations above have been read, signed, and made by an authorized official of the subrecipient named herein.

The appropriate programmatic and administrative personnel involved in this application are aware of the Prime Sponsor's policy in regard to subawards and are prepared to establish the necessary inter-institutional agreement consistent with those policies. I certify that the information submitted within the proposal is true, accurate, complete, is the original work of the subrecipient's PI, and to the best of my knowledge has not been used by other individuals in the preparation and submission of a similar grant application

ANY WORK BEGUN AND/OR EXPENSES INCURRED PRIOR TO THE EXECUTION OF A SUBAWARD AGREEMENT ARE AT THE SUBRECIPIENT'S OWN RISK.

<p><u>Signature of Authorized Institutional Official</u></p> <p><u>Date:</u></p>	<p><u>Authorized Official Information</u></p> <p>Name:</p> <p>Title:</p> <p>Email:</p> <p>Phone:</p>
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