



UNIVERSITY OF MASSACHUSETTS LOWELL

Subrecipient Commitment Form

For UMass Lowell Use Only

UML PI NAME:

PRIME SPONSOR:

SUBRECIPIENT'S LEGAL NAME:

SUBRECIPIENT'S PI:

PROPOSAL ENTITLED:

SUBRECIPIENT'S TOTAL FUNDS REQUESTED:

PERFORMANCE PERIOD: BEGINS:

ENDS:

SECTION A Proposal Documents

The following documents are included in our subaward proposal submission and covered by the certification below:

STATEMENT OF WORK (Required)

BUDGET AND BUDGET JUSTIFICATION (Required, In Agency Format)

SUBRECIPIENT COMMITMENT FORM, completed and signed by AOR (Required)

BIOGRAPHICAL SKETCHES OF ALL KEY PERSONNEL (In Agency Format)

OTHER SUPPORT (Current & Pending) of all Key Personnel (In Agency Format)

LETTER OF COMMITMENT / SUPPORT

SECTION B Certifications

1. Facilities and Administrative Rates included in this proposal have been calculated based on:

Our federally-negotiated F&A rates for this type of work, or a reduced F&A rate that we hereby agree to accept. **(If this box is checked**, a copy of your F&A rate agreement must be furnished via hard copy, website, or email)

Other rates (please specify the basis on which the rate has been calculated and attach explanation)

Not applicable (no indirect cost requested for Subrecipient)

2. Fringe Benefit Rates included in the proposal:

Are consistent with or lower than our federally negotiated rate agreement.

Are based on other rates (please specify the basis on which the rate has been calculated and attach explanation).

3. Human Subjects **Yes** **No** **Exempt**
(Copy of the IRB determination letter and approved “Informed Consent” form must be provided before any subaward will be issued).

Please provide FWA #

If “Yes”, have all key personnel involved completed human subjects training?

Yes **No**

Note: All key personnel engaged in human subjects research must take NIH, CITI, or other human subjects research training (http://grants.nih.gov/grants/policy/hs_educ_faq.htm; www.citiprogram.org) as required by NIH.

4. Animal Subjects **Yes** **No**
(Copy of the IACUC determination letter must be provided before any subaward will be issued.)

5. Conflict of Interest

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.” Subrecipient also certifies that, to the best of Institution’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 agrees to abide the policies of UMass Lowell <http://www.uml.edu/Research/OIC/Conflict-of-Interest/Forms.aspx>

Responsible Conduct of Research Education

Responsible Conduct in Research Education (NSF Projects Only): By checking this box, the Authorized Organizational Official of the subrecipient institution is certifying that, in accordance with the NSF Proposal Award Policies & Procedures Guide, the institution has a plan in place to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduates, graduate students and postdoctoral researchers who will be supported by NSF to conduct research.

Responsible Conduct in Research Education (NIH Projects Only): By checking this box, Subrecipient certifies, for applicable NIH Grants, that Subrecipient will monitor and maintain records for the individual training plans as proposed by Subrecipient, in accordance with NIH’s RCR training requirements.

SECTION D Fiscal Responsibility

The organization/ institution certifies that its financial system is in accordance with generally accepted accounting principles and (check all that apply):

has the capability to identify, in its accounts, all Federal awards received and expended and the Federal programs under which they were received;

maintains internal controls to assure that it is managing Federal awards in compliance with applicable laws, regulations, and the provision of contracts or grants;

complies with applicable laws and regulations;

can prepare appropriate financial statements, including the schedule of expenditures of Federal awards;

there are no outstanding audit findings which would impact contract costs. If there are findings, submit a copy of the most recent report that describes the finding and steps to be taken to correct the finding.

APPROVED FOR SUBRECIPIENT:

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 the application are aware of agency policy in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies.

Any work begun and/or expenses incurred prior to execution of the subaward agreement are at the subrecipient's own risk.

Signature: _____
(Signature of Subrecipient's Authorized Official)

Date:

Type or Print Name of Authorized Official:

Title:



AUDIT CERTIFICATION AND FINANCIAL STATUS QUESTIONNAIRE

Please note: This Audit Certification and Financial Status Questionnaire Form is to be completed by the Subrecipient if the Subrecipient is not subject to the audit requirements of the Uniform Guidance 2 CFR 200.

Subrecipient Name: _____

This Audit Certification is for the Subrecipient's most recently completed Fiscal Year Ending: _____

(Please respond to A or B, below, as applicable):

A. External independent audits of my organization/company have been completed for my organization's most recently completed Fiscal Year. State your organization's/company's fiscal year:

From: _____ to: _____
(MM/DD/YYYY) (MM/DD/YYYY)

Provided is the URL link to our true, complete and most current audit report:

If you do not have a link please attach a copy of your most current audit report with this document. If statement A is true then only completion of this page of the Audit Certification and Financial Status Questionnaire is required.

OR

B. My organization/company has **not** been audited by a U.S. Government audit agency or by an independent CPA firm for the most recently completed Fiscal Year (state organization's/company's fiscal year:

From: _____ to: _____
(MM/DD/YYYY) (MM/DD/YYYY)

I have completed this Audit Certification and Financial Status Questionnaire (4 pages) in its entirety. True and correct information concerning my organization's finances and fiscal policies have been provided in this Audit Certification and Financial Status Questionnaire, and in any attached financial statements covering the fiscal year noted above. (NOTE: Please answer all questions, providing a brief explanation where required. Do not leave any questions blank, simply indicate if a question is "not applicable".)

AUTHORIZED OFFICIAL

(Name) _____ (Signature) _____

(Title) _____

(Phone) _____ (Email) _____

(Congressional Dist. No.) _____ (EIN) _____

(DUNS No.) / (DUNS+4 if applicable) _____ (Date) _____

General Information:

- | | | |
|---|---|---|
| Y | N | 1. Does your organization have its financial statements reviewed by an independent public accounting firm? (Please enclose a copy of the most recent financial statements for your organization, audited or unaudited.) |
| Y | N | 2. Are duties segregated so that no one individual has complete authority over an entire financial transaction? |
| Y | N | 3. Does your organization have controls to prevent expenditure of funds in excess of approved, budgeted amounts? |
| Y | N | 4. Other than financial statements, has any aspect of your organization's activities been audited within the last two years by a governmental agency or independent public accountant? Explain. (Please provide a copy of any recent external audit report.) |

Cash Management:

- | | | |
|---|---|--|
| Y | N | 1. Are all disbursements properly documented with evidence of receipt of goods or performance of services? |
| Y | N | 2. Are all bank accounts reconciled monthly? |

Payroll

- | | | |
|---|---|--|
| Y | N | 1. Are payroll charges checked against program budgets? |
| | | 2. What system does your organization use to control paid time, especially time charged to sponsored agreements? |
-
-

Procurement

- | | | |
|---|---|--|
| Y | N | 1. Are there procedures to ensure procurement at competitive prices? |
| | | 2. Is there an effective system of authorization and approval of: |
| Y | N | a) capital equipment expenditures? |
| Y | N | b) travel expenditures? |

Property Management

- | | | |
|---|---|---|
| Y | N | 1. Are detailed records of individual capital assets kept and periodically balanced with the general ledger accounts? |
| Y | N | 2. Are there effective procedures for authorizing payment and accounting for the disposal of property and equipment? |

- Y N
3. Are detailed property records periodically checked by physical inventory?
 4. Briefly describe the organization's policies concerning capitalization and depreciation.

Cost Transfers

1. Briefly describe the organization's policies concerning cost transfers.

Indirect Costs

- Y N
1. Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate? Explain. **(Please provide a copy of any negotiated indirect cost rate agreement.)**

- Y N
2. Does the organization have procedures which provide assurance that consistent treatment is applied in the distribution of charges to all grants, contracts and cooperative agreements? Explain.

Cost Sharing

1. Briefly describe the organization's policies concerning cost sharing.

Compliance

- Y N
1. Does your organization have a formal policy of nondiscrimination and a formal system for complying with Federal civil rights requirements?

- Y N
2. Does your organization have a cash forecasting process which will minimize the time elapsed between the drawing down of funds and the disbursement of those funds?

3. Please provide a list of recent grants, contracts or cooperative agreements your organization has received from UMass Lowell:

Attachments

Recent Financial Statements External Review or Audit Report

Financial Statements, Audited or Unaudited

Indirect Cost Rate Agreement

List of Awards from UMass Lowell

