

Subrecipient Commitment Form

Part A: Subrecipient Information

Subrecipient Organization Information

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| Subrecipient (Sub) Legal Name: | |
| Sub UEI: | |
| Sub Congressional District: | |
| Sub Tax ID Number: | |
| Sub Principal Investigator: | |
| Sub Address: | |
| Sub Phone: | |
| Sub Email: | |
| Sub Fax: | |

Subrecipient Administrator Contact Information

| | | | |
|-------------|--|----------|--|
| Name/Title: | | Address: | |
| Phone: | | Email: | |

Subrecipient Financial Contact Information

| | | | |
|-------------|--|----------|--|
| Name/Title: | | Address: | |
| Phone: | | Email: | |

Authorized Official Contact Information

| | | | |
|-------------|--|----------|--|
| Name/Title: | | Address: | |
| Phone: | | Email: | |

Part B: Project Information

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| Project Title: | |
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| Prime Awarding Agency: | | Project Period: | |
| Total Proposed Amount for Project Period: | | Cost-Sharing Amount for Project Period: | |
| Performance Site (only if different): | | Facilities & Administration Rate: | |

Part B: Compliance Review

Project Use Information

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|---|-----|----|
| Human Subjects will be involved in the Sub’s portion of the project. | Yes | No |
| Animal Subjects will be involved in the Sub’s portion of the project. | Yes | No |
| Biological Hazards will potentially be used in the Sub’s portion of the project. | Yes | No |

Copies of IRB, IACUC, and Internal Biological Committee approval must be provided before subaward is issued.

Financial Conflict of Interest

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| Not applicable because the project is not funded by PHS or any other sponsor that has adopted federal financial disclosure requirements. | |
| Sub certifies that it has an active and enforce 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.” | |
| Sub does not have an active and/or enforced conflict of interest and agrees to abide by LMU’s policy. LMU’s policy is available at https://www.lmunet.edu/orgsp/policies . | |

Responsible Conduct of Research

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| The sub certifies, if the project is being funded by NSF, NIH, or USDA NIFA, that it maintains an Institutional Plan to meet the prime sponsor’s requirements for the Responsible Conduct of Research. | |
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Export Control

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| If applicable, the sub certifies that an Export Control Officer, or other Authorized person, has reviewed the Sub’s proposal for compliance with Federal Export Control laws. Explain potential problems in an attachment with this document. | |
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NIH International Subrecipient Report Requirements (for non-US subs only)

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| <p>If the prime sponsor is the U.S. National Institutes of Health (NIH), Subrecipient is aware of the provisions of NIH GPS 15.2.1 requiring that international subrecipients provide access to copies of all lab notebooks, data, and documentation that support any resulting research outcomes, and Subrecipient confirms that it is able to comply and provide Lincoln Memorial University with regular access to these materials (i.e. annually) for the life of the subaward.</p> | |
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The Subrecipient official(s) have examined, approved, and attested to the correctness and completeness of this proposal. Aware of the policies of the primary awarding agency, the Subrecipient officials involved in this application consent to comply with the terms, conditions, and certifications of the award, and they are ready to create the required inter-institutional agreement in accordance with that policy.

The following documents are attached:

| | | | |
|----------------------|--|------------------|--|
| Statement of Work | | Line-Item Budget | |
| Budget Justification | | Other | |

Signature of Authorized Official

Date

Name and Title of Authorized Official