Sub-award Request

Department to Complete:

Request Type:	If Amendment, select action:	
UC PI Name:		
Sponsor Name/Sponsor #:		
Reportable Cost Share by Sub-recipient Yes If yes, attach cost share budget	No SAP#:	Kuali Award#:
Sub-recipient Organization Name:		
Start Date (of this action):	_ End Date (of this action):	
Amount released this action:	Total Anticipated Amount (New	Subawards only):
Title of the Sub-recipient Scope of Work:		
PI to complete:		
Please complete the following for all sub-aw	vard/amendment requests:	
Does the PI wish to include and spe sub-award? If yes, specify reports a Comments		ts, carryover, prior approval for equipment in the Yes No
Does the department or PI wish to	review the sub-award prior to sendin	g? Yes No
Does the sub-recipient work includ	e the use of human subjects?	Yes No
If yes, please provide Approved	sub-recipient protocol number and	expiration date:
If yes, will human subject data	be addressed in the sub-award? Cho	oose from below.
Not Appl	licable-to be selected when it has bee	en determined that a Data Transfer Usage
Agreement (DTUA)	or additional terms are not necessary	ι.
Applicab	ole-to be selected when it has been de	etermined that either a DTUA or additional terms
will be necessary to	address the transfer of human subj	ects data.
Human s	subjects data will not be addressed ir	n this agreement-if it cannot be determined at the
time of the sub-awa	ard issuance whether a DTUA or addi	tional terms will be necessary, or if the PI and sub-
recipient agree to a	ddress human subjects data	
Does the sub-recipient work include	e the use of vertebrate animals?	YES No
If yes, please provide sub-recip	ient protocol number and expiration	date
If USDA regulated species, please a	lso provide sub-recipient registration	number
Is the work performed by the sub-r	recipient Export Controlled?	Yes No
Does the work performed by the su	b-recipient contain Controlled Unclas	ssified Information? Yes No

Sub-award Request

If requesting a sub-award amendment, please complete the following:

Is the performance of the sub-recipient satisfactory?	Yes	No	
Has the sub-recipient submitted and have you reviewed all technical performar	nce report	s in a tiı	mely fashion?
	Yes	No	N/A

Have all invoices been reviewed for reasonableness to work performed?

I hereby authorize Sponsored Research Services to prepare and release a sub-award. I understand that as the Principal Investigator of this award, I am responsible for verifying that the sub-recipient is suitable and uniquely qualified to carry out the scope of work. I have disclosed to the University, in writing, any relationships between myself or other key personnel at University of Cincinnati and collaborators at the sub-recipient organization, per the University of Cincinnati's Conflict of Interest Policy, University Rule 10-17-08. I am also responsible for monitoring the sub-recipient's work progress, including any technical reports and other deliverable as defined in the sub-recipient's scope of work. I must authorize the release of funds for sub-recipient payment of invoices and notify SRS immediately if there are any problems with a sub-recipient's performance on this project.

Signature of UC Principal Investigator: (Designee signature NOT allowed)

Date: _____

Yes ____ No ____

Required Documents for Requests:

- 1. Attachment 3A
- 2. Attachment 3B
- 3. Statement of Work (SOW)
 - a. SOW should be detailed and specific to the subrecipient. For subaward amendments, each year should be specific to the project aims (deliverables). May need to submit revised SOW each year.
 - b. SOW should answer, "What is being done, who is doing it, over what time period, and for what dollar amount (or percentage of the total subaward amount)?
- 4. Budget
- 5. Budget Justification
- 6. FEO Prime Award