

FDP Subrecipient Pilot - Supplemental Project Information

Subrecipients **MUST** submit form prior to agreement execution with the University of California, Davis (UC Davis). It provides a checklist of documents and certifications required. Subrecipients complete this form on an annual basis for multi-year projects.

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SECTION A General Information	n	
Subrecipient Name:		Subrecipient PI:
Project Title:		
Prime Sponsor:		Prime Sponsor Number:
Budget Period:	to	DUNS Number:
		UEI Number:
SECTION B Program Specific C	Compliance	
1. Human Subjects		
a) Project involves Human Subjects	Research: Yes	No
b) Institutional Review Board Approv	al: Pending A	Approved Exempt Not Applicable
NOTE: IRB Determination and Ap	proval MUST be subn	nitted to UC Davis.
Date of IRB Determination/Approval: Subrecipient Protocol Number:		
c) Key Personnel have completed N	H Human Subjects Tr	raining requirements: Yes No
2. Animal Subjects		
a) Project involves Animal Subjects I	Research: Yes	No
b) Institutional Animal Care and Use	Committee Approval:	Pending Approved Not Applicable
NOTE: IACUC Determination and Approval MUST be submitted to UC Davis.		
Date of IACUC Approval: Subrecipient Protocol Number:		
3. Conflict of Interest (For Non-PHS/NSF Individual COI or any Organizational COI Requirements ONLY)		
Subrecipient hereby certifies it will comply with the additional standards for financial disclosure, both individual or organizational, and Conflict of Interest which are required by the Prime Sponsor and are not covered by the FDP FCOI Clearinghouse. Subrecipient also certifies that, to the best of the Institution's knowledge:		
agreement, and required by its cor 2) All identified Conflict of Interest accordance with Subrecipient's Co any funds under any resulting agre	nflict of interest policy have or will have beer on flict of Interest policy eement; the Sponsor's guideling	n satisfactorily managed, reduced, or eliminated in and/or sponsor requirements prior to the expenditure of the sponsor requirements and the sponsor requirements are sponsor requirements.
4. Cost-Sharing		
Cost Share or Matching is being pro	vided by the Subrecip	ient: OYes ONo Amount:
NOTE: Cost sharing MUST be detailed and justified in the Subrecipient BUDGET.		
SECTION C. Subraciniant Signs	41140	•
SECTION C Subrecipient Signa		and and and by an authorized official of the Cubus sinisat. The appropriate
programmatic and administrative personnel involved	d in this application are awa	ned, and made by an authorized official of the Subrecipient. The appropriate re of agency policy in regard to subawards and are prepared to establish the 'k begun and/or experiences incurred prior to execution of an
Signature of Subrecipient Authorized Off	cial	Date
Printed Name of Authorized Official		Title of Authorized Official
E-mail Address		Phone Number