

SUBRECIPIENT COMMITMENT FORM – Federal or non-Federal Sponsor Flow Down

Northwestern Completes this Section

Northwestern Principal Investigator	
InfoEd Record Number	
Project Title	
Prime Sponsor	
Subrecipient Institution	
Subrecipient Principal Investigator	
Subrecipient Proposed Project Dates	

Subrecipient Completes this Section

	Initial Year Budget	Cumulative Project Budget
Total Direct Costs		
Total F&A Costs		
Total Direct + F&A Costs		
Cost Share <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, attach cost share commitment letter)		
UEI:	EIN:	
Congressional District:	Cognizant Audit Agency:	
F&A Rate Agreement Date:	F&A Rate:	
Subrecipient Institution is (select all applicable options)	<input type="checkbox"/> For-profit <input type="checkbox"/> Non-profit <input type="checkbox"/> Foreign <input type="checkbox"/> Government <input type="checkbox"/> Other _____	
Subrecipient Work Involving Research Subjects (select applicable options)	<input type="checkbox"/> Human Subjects <input type="checkbox"/> Vertebrate Animals <input type="checkbox"/> No Human Subjects or Vertebrate Animals	

The following documents must accompany the completed subrecipient commitment form:

<input checked="" type="checkbox"/> Statement of Work	<input checked="" type="checkbox"/> Detailed Budget	<input checked="" type="checkbox"/> Budget Justification
<input type="checkbox"/> Other (list all):		

**Conflict of Interest
(Applicable to federal or non-federal sponsors that have COI requirements)**

By signing this form, the Subrecipient Organization/Institution certifies that they have policies and procedures necessary to comply with any conflict of interest provisions and requirements applicable to this specific research activity and/or sponsoring entity.

The appropriate programmatic and administrative personnel of subrecipient institution involved in this grant application are aware of the prime sponsor's consortium policy and are prepared to establish the necessary inter-institutional agreements consistent with that policy.

Signature of Subrecipient's Authorized Official (Date)

Name and Title of Subrecipient's Authorized Official

Please return completed and signed subrecipient commitment form and accompanying documents by email to:

Name:

Email Address: