



SUBRECIPIENT COMMITMENT FORM

Sponsor: _____ Program: _____

KSU PI: _____

Proposal Title: _____

Subrecipient Organization's Legal Name: _____

Address: _____

DUNS: _____

EIN: _____

Federal E-Verify Number: _____

Project Location (If different from Subrecipient Address): _____

: _____

Subrecipient PI: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Statement of Work

Budget in agency-required format

Budget Justification in agency-required format

Small/Small Disadvantaged Business Subcontracting Plan, in agency-required format
(required for proposal over \$750,000)

Biosketches/Resumes, in agency-required format

Current and Pending Support / Other Support

Other: _____

Other: _____

_____ have been calculated based on the following:

Our federally-negotiated F&A rate for this type of work, or a reduced F&A rate that we hereby agree to accept. (

Other rates (please specify in Section E)

Not applicable (no indirect cost request for the subrecipient)

_____ have been calculated based on the following:

Rates consistent with or lower than our federally negotiated rates

Based on actual rates (please specify in Section E)

Other rates (please specify in Section E)

COI for PHS (or Sponsors following PHS policies):

42 CFR Part 50. 604 Subpart F requires that institutions conducting PHS-funded research
Further,

My organization is a for-profit entity.

My organization is a U.S. government entity.

2 CFR 200 Subpart F

The information, certifications, and representations above have been read,