

SUBRECIPIENT COMMITMENT FORM

Name of Stanislaus State PI:	
Prime Sponsor:	
Title of Proposal:	
Period of Performance: From: To:	-
1. Subrecipient Eligibility	
Dear (Potential) Subrecipient:	
Any organization planning to enter into a <u>collaborative</u> subrecipier <u>the proposal stage</u> . Please answer the following questions to detebetween your organization and Stanislaus State. <u>This form will be organization's Authorized Official</u> .	ermine if a formal subrecipient partnership can be established
2. Subrecipient Requirements and Responsibilities	
Stanislaus State views a subrecipient organization as a true partner in responsibilities of a Stanislaus State subrecipient are different from that	
Subrecipients	Contractors
(a) Subrecipient's PI (named in Section D below) will take a significant role in programmatic decision making and assist the PI	(a) Provides routine goods and/or services to other customers or clients and/or
achieving the project's goals and objectives. (b) Subrecipient will be subject to all of the compliance	(b) Provides goods or services developed according to the specifications of the PI and/or
requirements from the prime award that are pertinent to the subrecipient, e.g., effort reporting on federal awards.	(c)) Provides personnel services that are primarily advisory in nature and/or
(c)) Subrecipient will be expected to provide a complete copy of the subrecipient's most recent audit report, or the URL link to a complete copy, before a subaward can be established.	(d) Provides other ancillary services related to the sponsored project per the instructions of the PI.
	subrecipient as described above and agrees to the project roles, If "No," please contact the PI about procuring your organization's
Subrecipient Organization Legal Name:	
Principal Investigator Name:	

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d by the certifications below.
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uced F&A rate that we hereby agree to accept. link to the agreement must be provided.)
n calculated in Section G Comments
sed on the following:
nk to the agreement must be provided.)
calculated in Section G Comments below.
on
on ☐ Foreign Owned ☐ For Profit Organization
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n active and enforced conflict of interest policy that
Responsibility of Applicants for Promoting best of Institution's knowledge (1) all financial e funded by or through a resulting agreement, and

		= Subreci	pient does no	t have an active and/or enforced conflict of interest policy.			
e)	Debarment, Suspension, Proposed Debarment Is the PI or any other employee or student participating in this project debarred, suspended or otherwise excluded from or ineligible for participation in Federal assistance programs or activities? ☐ Yes ☐ No If 'Yes', please explain.						
	The	subrecip □ Are	ient certifies ≣Are Not	that they: (answer all questions below) presently debarred, suspended, proposed for debarment, or declared ineligible for award of Federal Contracts			
		☐ Are ☐ Have	■Are Not ■Have Not	presently indicted for, or otherwise criminally or civilly charged by a governmental entity within three (3) years preceding this offer, been convicted of or had a civil judgement rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or preforming a public (Federal, State, or Local) contract or subcontract; violation of Federal or State antitrust statues relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or			
		☐ Have	■Have Not	destruction of records, making false statements or receiving stolen property. within three (3) years preceding this offer, had one or more contracts terminated for default by any Federal Agency			
f) I	Respo	nsible Co	nduct of Res	earch (RCR) [For NSF, PHS, & USDA-NIFA funded projects]:			
	☐ The Organization certifies that it has an Institutional Plan to meet NSF's Educational Requirements for the Responsible Conduct of Research, as required under Section 7009 of the "America COMPETES ACT" PUBLIC LAW 110-69-August 9, 2007 and Public Health Service (PHS).						
	Subrecipient organization herby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by the project will be trained in the responsible and ethical conduct of research, as applicable.						
		□ Subrecipient organization herby certifies that it will ensure that all program directors, faculty, undergraduate students, graduate students, postdoctoral researchers, and any staff participating in the research project will be trained in the responsible and ethical conduct of research, as required per USDA-NIFA terms & conditions.					
g)	Lobb	ying:					
		certifies	that is in comp	ent funds allotted under this proposal are expected to exceed \$100,000 the Organization pliance with the requirements of Section 1352, Title 31, U.S. Code, that limits the use of influence certain Federal contracting ad financial transactions.			
6. Aut	horiz	ed Repre	esentative A	pproval			
applica agreem within t stateme accept require execution	entativ tion and nents of he appents of respond d if and on of a	e of the Sure aware of consistent olication is relaims mansibility for award is reasonable.	ubrecipient na f agency polic with those pol true, complet ay subject the the scientific made as a res d agreement a	epresentations above have been read, signed, and made by an authorized institutional amed herein. The appropriate programmatic and administrative personnel involved in this cies in regard to subawards and are prepared to establish the necessary inter-institutional licies. By the their signatures below, Subrecipient certifies (1) that the information submitted and accurate to the best of their knowledge; (2) that any false, fictitious, or fraudulent and PI to criminal, civil, or administrative penalties; and (3) that the PI agrees to conduct of the project and to provide the required progress and other administrative reports as sult of the prime recipient's application. Any work begun and/or expense incurred prior to are at the Subrecipient's own risk. Signature of Subrecipient's Principal Investigator			
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Date				Date			

 $\frac{Doug\ Roberts,\ Vice\ Chancellor,\ Business\ Services}{\text{Name and Title of Authorized Institutional Representative}}$

Agreement Contacts					
	University Contacts	Subrecipient Contacts			
Administrative	Contact	Administrative Contact			
Name:		Name:			
Address: Telephone:	CSU Stanislaus One University Circle Turlock, CA 95382 (209) 667-3493	Address: Telephone:			
Fax: Email:	(209) 664-7048	Fax: Email:			
Principal Inves	stigator	Principal Investigator			
Name: Address:	CSU Stanislaus One University Circle Turlock, CA 95382	Name: Address:			
Telephone: Fax: Email:	(209) (209)	Telephone: Fax: Email:			
Financial Cont	act	Financial Contact			
Name: Address:	Trish Hendrix Post Award Manager CSU Stanislaus	Name: Address:			
Telephone: Fax: Email:	One University Circle Turlock, CA 95382 (209) 667-3979 (209) 667-3076 phendrix@csustan.edu	Telephone: Fax: Email:			
Authorized Off	icial	Authorized Official			
Name:	Kimberly Greer Provost and VP Academic Affairs	Name:			
Address:	CSU Stanislaus One University Circle Turlock, CA 95382	Address:			
Telephone: Fax: Email:	(209) 667-3493 (209) 664-7048 kgreer@csustan.edu	Telephone: Fax: Email:			