

Subrecipient Statement of Collaborative Intent (SSCI)

Part II: Subrecipients/Subcontractors NOT participating in the FDP Clearinghouse Pilot complete.

CERTIFICATIONS

- Facilities & Administrative Rates** included in this proposal have been calculated based on the following:
Our federally negotiated F&A rate for this type of work. **Our negotiated rate agreement is provided.**
No federal negotiated rate and we hereby agree to accept the **10% de minimis MTDC rate** as a subrecipient.
A reduced F&A rate dictated by the prime sponsor that we hereby agree to accept. **Rate:** _____ **Base:** _____
Not applicable (no indirect cost are requested). **If checked, please specify rationale in Comment Section.**
Indirect costs are not separately requested as costs are fully burdened.
- Fringe Benefit Rates** included in this proposal have been calculated based on the following:
Rates are consistent with our federally negotiated rates. **Our negotiated rate agreement is attached.**
Other rates (**please specify in Comment Section** the basis on which the rate has been calculated).
Fringe Benefits are not separately requested as costs are fully burdened.
- CONFLICT OF INTEREST – PLEASE ATTACH either 1) your institution’s COI Policy OR 2) the PHS Financial Disclosure & Training Form**
 - National Science Foundation (NSF) - Financial Conflict of Interest - Applicable to projects funded by NSF, including NSF flow-through or any sponsor following NSF’s COI Policy.**
Subrecipient organization/institution hereby certifies that it **HAS** an active and enforced *policy on Conflict of Interest* consistent with the provision of NSF Award & Administration Guide Chapter IV.A. ****Please attach COI Policy - copy or link.**
Subrecipient does **NOT** have an active and/or enforced *Conflict of Interest policy* and hereby agrees to abide by **VU’s policy**. To comply with **VU’s policy** as it pertains to financial conflict of interests, **please attach a completed PHS Disclosure Form.**
 - Public Health Service (PHS) – Financial Conflict of Interest - Applicable to projects funded by PHS/NIH, or any sponsor following PHS.**
Subrecipient organization/institution hereby certifies that it **HAS** an active and enforced policy on Conflict of Interest consistent with the provision of 42 CFR Part 50 Subpart F. ****Please attach COI Policy - copy or link.**
Subrecipient does **NOT** have an active and/or enforced Conflict of Interest policy and hereby agrees to abide by **VU’s policy**. To comply with **VU’s policy** as it pertains to PHS financial conflict of interests, **please attach a completed PHS Disclosure Form.**
 - Any other Funding Agency – Financial Conflict of Interest**
Subrecipient organization/institution **HAS** a *policy on Conflict of Interest*, but it is NOT consistent with NSF or PHS requirements. ****Please attach COI Policy - copy or link.**
Subrecipient organization/institution does **NOT** have an active and/or enforced *Conflict of Interest policy* and hereby agrees to abide by **VU’s policy**. To comply with **VU’s policy** as it pertains to PHS financial conflict of interests, **please attach a completed PHS Disclosure Form.**
- Ethics in Research Training**
Applicable to projects funded by NSF or any other programs requiring Ethics in Research Training.
Not applicable because this project is not being funded by NSF or any other programs requiring Ethics in Research Training.
Subrecipient organization/institution hereby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by this NSF proposal will be trained on the oversight in the responsible and ethical conduct of research.

AUDIT STATUS

- Was the subrecipient required to conduct an annual audit in accordance with the *Single Audit Act or Uniform Guidance Subpart F, Audit Requirements* for the most recent Audit year? ***YES NO**
 - Was an audit in accordance with the *Single Audit Act* completed for the most recent fiscal year? **Yes No**
 - Were there any audit findings reported?..... **Yes No If Yes, please clarify in the comments**

*** If YES is checked,** a complete copy of subrecipient's most recent audit report, or the Internet URL link to a complete copy, must be furnished to VU before a subaward will be issued. **URL:** _____

If NO audit was completed OR If Subrecipient is NOT subject to the Single Audit Act or Uniform Guidance, then additional methods may be required to assess compliance.

COMMENTS

SUBRECIPIENT INSTITUTIONAL INFORMATION

- Is subrecipient currently registered in Central Contractor Registration via SAM? (www.sam.gov) **YES NO If no, please begin registration in Sam.gov**
- UEI #:** _____ **3. EIN #:** _____
- The year in which the current iteration of this Institution was established?** _____

ORGANIZATIONAL - EXCLUSIONS

The Organization Certifies they (answer all questions below):

- are are not presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal contracts.
- are are not presently indicted for, or otherwise criminally or civilly charged by a government agency.
- have have not within three (3) years preceding this offer, been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commissions of contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements or receiving stolen property.
- have have not within 3 years preceding this offer, had one or more contracts terminated for default by any federal agency.