



SUBCONTRACTOR COMMITMENT FORM

This form is intended to be completed & signed by an organization participating on a Cornell project as a subcontractor

Subcontractor Legal Name: _____

Subcontractor PI Name: _____

Address: _____ City: _____ State: _____

Address where research will be performed: _____ City: _____ State: _____

Proposal Title: _____

Period of Performance: _____ Total Amount Requested _____

Cornell's PI Name: _____

Prime Sponsor: _____

SECTION A – Proposal Documents

The following documents are included in our proposal submission and covered by the certifications below (check as applicable):

- SUBCONTRACTOR COMMITMENT FORM (required for all PHS proposals)**
- STATEMENT OF WORK (required for all proposals)**
- BUDGET AND BUDGET JUSTIFICATION (required for all proposals)**
- Certificate of Insurance (may be required at time of issuance of subaward)
- Small/Small Disadvantaged Business Subcontracting Plan, in agency-required format
- Biosketches of all Key Personnel, in agency-required format
- Other: _____

SECTION B - Certifications

1. **Facilities and Administrative Rates** included in this proposal have been calculated based on:
 - Our federally-negotiated F&A rates for this type of work, or a reduced F&A rate that we hereby agree to accept. (If this box is checked, please attach a copy of your F&A rate agreement or provide a URL link to the agreement.)
 - Other rates (please specify the basis on which the rate has been calculated in Section D Comments below)

2. **Fringe Benefit Rates** included in this proposal have been calculated based on:
 - Rates consistent with or lower than current/applicable federally-negotiated rates (If this box is checked, please attach a copy of your FB rate agreement or provide a URL link to the agreement.)
 - Other rates (please specify the basis on which the rate has been calculated in Section D Comments below).

3. **Small Business Concern** Yes No
 Subcontractor represents that it is a small business concern as defined in 13 CFR 124.1002.
 If "Yes": Subcontractor represents that it is a:
 - Small disadvantaged business as certified by the Small Business Administration
 - Women-owned small business concern
 - Veteran-owned small business concern
 - Service-disabled veteran-owned small business concern
 - HUBZone small business concern

4. **Cost Sharing** Yes No **Amount:** _____
 Cost sharing amounts and justification should be included in the subcontractor's budget

5. **Human Subjects** Yes No **Approval Date:** _____
 If "Yes": Copies of the IRB approval must be provided before any subaward will be issued. Please forward these documents to Cornell's PI and Cornell's Office of Sponsored Programs Subcontract Team at cu_subawds@cornell.edu as soon as they become available.
 If "Yes": Have all key personnel involved completed Human Subjects Training? Yes No

6. **Animal Subjects** Yes No **Approval Date:** _____
 If "Yes": A copy of the IACUC approval must be provided before any subaward will be issued. Please forward this document to Cornell's PI and Cornell's Office of Sponsored Programs as soon as it becomes available.

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7. Conflict of Interest

Not applicable because this project is not being funded by a sponsor that has adopted the federal financial disclosure requirements.

A. Mandatory for PHS, or other sponsors that have adopted the requirements regarding Conflicts of Interest, outlined in 42 CFR 50, Subpart F, Responsibility of Applicants for Promoting Objectivity in Research:

Subcontractor Organization/Institution certifies that it has an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research" and has registered as an organization with a PHS-compliant FCOI policy with the FDP Clearinghouse.

Subcontractor Organization/Institution certifies that it has an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research." Subcontractor also certifies that, to the best of Institution's knowledge, (1) all financial disclosures have been made related to the activities that may be funded by or through a resulting agreement, and required by its conflict of interest policy; and, (2) all identified conflicts of interest have or will have been satisfactorily managed, reduced or eliminated in accordance with Subcontractor's conflict of interest policy prior to the expenditures of any funds under any resultant agreement.

Subcontractor does not have an active and/or enforced conflict of interest policy and wishes to comply with Cornell's Financial Conflict of Interest policy.

B. For NSF, or other sponsors that have adopted NSF's conflict of interest requirements:

Subcontractor certifies it is in compliance with the requirement to maintain a written and enforced policy on conflict of interest and complies with Chapter IX.A. of the NSF Award and Administration Guide February 2019.

Subcontractor acknowledges that failure to have a fully implemented conflict of interest policy may render it ineligible to receive funding from Cornell University. Subcontractor further acknowledges and agrees, within 15 calendar days of Cornell's request, Subcontractor will provide to Cornell copies of and/or access to any and all relevant documentation deemed necessary by Cornell to establish Subcontractor's compliance with its or Cornell's conflict of interest policy.

8. Debarment and Suspension

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", explain in Section D *Comments* below)

The Subcontractor 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 entity 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 commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property
- have have not within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency

SECTION C - Audit Status

9. Audit Status

Subcontractor receives an annual audit in accordance with OMB Circular A-133.
Most recent fiscal year completed: FY _____



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Were any audit findings reported? (If "Yes," explain in Section D, *Comments*, below.) Yes No

Please attach a complete copy of your most recent A-133 audit report or provide the URL link to a complete copy.

Subcontractor DOES NOT receive an annual audit in accordance with OMB Circular A-133. If awarded, Subcontractor will be required to provide a copy of most recent audited organizational financial statements.

- Subcontractor is a:
- Non-profit entity (under federal funding threshold)
 - Foreign entity
 - For profit entity
 - Government entity

SECTION D - Comments

APPROVED FOR SUBCONTRACTOR

The information, certifications and representations above have been read, signed and made by an authorized official of the Subcontractor named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency policy in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies. **Any work begun and/or expenses incurred prior to execution of a subaward agreement are at the Subcontractor's own risk.**

Signature of Subcontractor's Authorized Official

Legal Name of Subcontractor's Organization/Institution

Name and Title of Authorized Official

Address

Email

City, State, Zip

Phone

Federal Employer Identification Number (EIN)

Date

DUNS or DUNS+4 number

Unique Entity Identifier (UEI)

Subcontractor's Congressional District

Is Subcontractor owned or controlled by a parent entity? Yes No

If "Yes", please provide the following:

Parent Entity Legal Name: _____

Parent Entity Address, City, State, Zip: _____

Parent Entity Congressional District: _____

Parent Entity DUNS: _____

Parent Entity EIN: _____