

FDP EXPANDED CLEARINGHOUSE PARTICIPANT COMMITMENT FORM

Use this form only if your institution is an FDP Expanded Clearinghouse participant. For more information and the list of participating institutions, see <https://fdpclearinghouse.org/organizations>.

If your institution is **not** participating in the FDP Expanded Clearinghouse, use the Subrecipient Commitment Form and guidance at https://spo.berkeley.edu/forms/subaward/subrecipient_instructions.html.

UCB Proposal Information – To be completed by the UCB PI (or delegate) prior to submission to SPO.

Name of UC Berkeley PI: _____ Phoebe Proposal #: _____
 Title of Proposal: _____
 Name of Subrecipient: _____
 Program Announcement/RFP URL: _____
 Proposed Subrecipient Period of Performance: From: ___/___/___ To: ___/___/___

Subrecipient Information – To be completed by the Subrecipient prior to submission to SPO.

Name of Subrecipient’s Project Director/PI (Required): _____		Phone: _____
		Email: _____
Amount of Funding Requested: _____	Amount of Cost-Sharing Committed: _____	NA: _____
Performance Site’s Address (if different from the FDP Entity Profile): Include ZIP Code +4 or other postal code: _____		Performance Site’s Congressional District (if different from the FDP Entity Profile and in U.S.): _____
		Unique Entity Identifier (UEI) (available through https://sam.gov/content/home): _____

Certifications – To be completed by the Subrecipient prior to submission to SPO.

Research Subject Compliance Information (check as applicable):

- Yes No Does the work include Embryonic Stem Cells?
- Yes No Will Human Subjects be involved in the subrecipient’s portion of this project?
- Yes No Will Animal Subjects be involved in subrecipient’s portion of this project?

Responsible Conduct of Research (RCR) (for NSF-funded projects only):

- Yes No My organization certifies that it has an Institutional Plan to meet NSF’s Educational Requirements for the Responsible Conduct of Research, as required under the “America COMPETES Act” PUBLIC LAW 110-69-August 9, 2007.
- Yes No My organization certifies that it has a training program in place and will train all undergraduate and graduate students and postdocs in accordance with NSF’s RCR requirements.

Subrecipient’s Authorized Official Representative (AOR) Approval

I certify that my organization is correctly categorized as a Subrecipient and is not a contractor. The information provided in our proposal and on this form is true and correct, and my organization will honor any commitments made in our proposal. I am the authorized official representative (AOR) of the Subrecipient named herein, and I have the authority to legally bind my organization in grants administration matters. I understand that: (a) any work we begin and/or expenses we incur related to our proposal prior to full execution of a subaward agreement will be at my organization’s own risk, and (b) no work involving human subjects and/or animals may begin until my organization has obtained registered Institutional Review Board and/or Animal Care and Use Committee review and approval.

_____ Signature of Subrecipient’s Authorized Official	Date: _____ Name and Title of Authorized Official: _____
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