

University of Louisiana at Lafayette
Sponsored Programs Finance Administration Compliance

Grant	Grant Description	New	Budget Revision
Fund	Fund Description		
Org	Org Description	Amendment	Other (explain):
Program	Program Description		

AWARD SUMMARY

PI _____	Department _____
Co-PI _____	
Agency _____	Agency ID _____
Prime Agency _____	Prime ID _____
Award Type <input type="text" value=""/>	Agency Type <input type="text" value="STATE"/>
Title _____	CFDA No <u>n/a</u>

ACTION	PROPOSAL	FUNDING	From	To	EFFECTIVE PERIOD
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	-	_____	_____	_____
_____	_____	-	_____	_____	_____
_____	_____	-	_____	_____	_____
_____	_____	-	_____	_____	_____
		Cumulative	\$0.00		

TERMS AND CONDITIONS

Technical Reports	_____
Equipment	_____
Budget revisions	_____
Travel restrictions	_____
Publications	_____
No Cost Extensions	_____
Intellectual Property	_____
Special Terms	_____

COMPLIANCE

Committee Approval	<input type="checkbox"/> IRB _____	<input type="checkbox"/> IBC _____	<input type="checkbox"/> RSC _____	<input type="checkbox"/> IACUC _____
Other	<input type="checkbox"/> Data Management	<input type="checkbox"/> E-Verify	<input type="checkbox"/> Financial Conflict of Interest	
	<input type="checkbox"/> Export Controls	<input type="checkbox"/> Fly America Act	<input type="checkbox"/> Responsible Conduct of Research	
Notes	_____			

FINANCIAL INFORMATION

Project Start	PMS Code	Cost Share Fund	IDC Rate
Project End	Predecessor Fund	Grant Org	
Exp End Date	Cash Receipt Bank	Cost Share	Fringe
Fin Report Type <input type="text" value="NA"/>	Frequency <input type="text" value=""/>	Final Due Date:	

BILLING INFORMATION

Billing Type <input type="text" value=""/>	Billing Due Date:	Contact Information
Billing Format <input type="text" value=""/>	Final Invoice Due:	Name
Other (Describe):		Email
Billing Frequency <input type="text" value=""/>	Backup Required: <input type="text" value=""/>	Phone
Details:	Describe:	Billing Address (Address Type GB)
Remit Vehicle <input type="text" value="MAIL"/>	Retainage <input type="text" value=""/>	Street 1
Portal:	Retainage Amt	Street 2
Other (Describe):	Retainage %	City, State, Zip
		Name
		Email
		Phone

Routing & Signatures

1.) Principal Investigator -

(1) I have reviewed this agreement. I am able to comply with the terms and conditions of this agreement, including but not limited to meeting the timelines, accomplishing all goals and objectives, adhering to the budget constraints, and completing all reports and closeout requirements.

(2) If this award contains a subrecipient, I will monitor all subrecipient activity and approve all invoices received from the subrecipient.

(3) If applicable, I have established procedures to ensure compliance with special circumstances including but not limited to ensuring confidentiality and data security. Special procedures are attached to this agreement.

Principal Investigator Date

2.) Director, SPFAC - I have reviewed this agreement. The budget is in compliance with all applicable University policies and State and Federal regulations. SPFAC is able to manage compliance issues.

Director, SPFAC Date

3.) Director, Operational Review - I have reviewed this agreement. It is compliant with University policies. Any important or novel legal conditions that warrant my guidance have been addressed.

Director, Operational Review Date

4.) VP for Research - I have reviewed this agreement. The goals and objectives of this project are consistent with the University's research mission. Any important or novel circumstances that warrant my guidance have been addressed.

VP for Research Date

5.) VP Finance & Administration - I have reviewed this agreement. The University is able to support all financial commitments in this agreement. Any important or novel financial circumstances that warrant my guidance have been addressed.

VP Finance & Administration Date

6.) Authorized Institutional Representative (AOR)

VP Academic Affairs, Provost - I have reviewed this agreement. The University is able to support all commitments in this agreement. Any important or novel circumstances that warrant my guidance have been addressed.

VP Academic Affairs, Provost Date