**SUBRECIPIENT LETTER OF INTENT**

East Carolina University is preparing the consortium proposal described below. Subreceipient consortium partners must complete this form and send it (along with appropriate proposal elements) to the listed ECU Principal Investigator and Unit Administrator.

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| **Project Identification** (to be completed by ECU) | | | |
| ECU PI/PD: |  | Email: | Phone: |
| ECU Unit Admin: |  | Email: | Phone: |
| ECU ORA Officer: |  | Email: ora@ecu.edu | Phone: 252.328.9530 |
| Prime Sponsor: | | | |
| Opportunity #: | | Is project R&D: | CFDA: |
| Project Title: | | | |
| Project Period (*mm/dd/yyyy*):       to | | | ECU Proposal # |

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| **Subrecipient Entity** (to be completed by Subrecipient) | | Listed in FDP Clearinghouse | | |
| Legal Name of Entity: | | | | UEI: |
| Address: | | | Zip+4: | EIN: |
| Central Office Info | Website: | Email: | | Phone: |
| Entity Type: | | | | |
| Other Entity Information: | | | | Congress District: |
| Significant changes in sponsored project leadership or systems within the last 24 months? | | | | |
| Is subrecipient entity owned or controlled by a parent entity?  Yes  No *If yes complete all information related to parent entity* | | | | |
| Legal Name of Parent Entity: | | | | UEI: |
| Address: | | | | Congress District: |
| **Subrecipient Points of Contact (POC)** (list officials to be named on subaward contracts) | | | | |
| Principal Investigator: |  | Email: | | Phone: |
| Administrative POC: |  | Email: | | Phone: |
| Financial POC: |  | Email: | | Phone: |
| Authorized Signatory: |  | Email: | | Phone: |

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| **Project Summary** (to be completed by Subrecipient) | | | |
| Cost Type | Direct | Indirect | Total |
| Funds Request |  |  |  |
| Cost Share |  |  |  |
| Total Project |  |  |  |
| Negotiated Indirect Cost Rate Agreement (NICRA): | | | Rate % Used: |
| Link to NICRA: | | | |
| Will subrecipient scope of work involve research subjects: | | | |
| Additional proposal elements related to this proposal and covered by the certifications below:  Statement of Work (required)  Budget (required)  Budget Justification (required)  Biosketch(es)  Other Support | | | |

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| **Conflict of Interest** (applicable only to PHS, NSF, or other sponsors that have adopted the federal financial disclosure requirements) | |
|  | Subrecipient 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 45 CFR Part 94 “Responsible Prospective Contractors.” |
|  | Subrecipient does not have an active and/or enforced conflict of interest policy and agrees to abide by ECU’s policies described at <https://rede.ecu.edu/oric/conflicts-of-interest-policies-and-sops/>. This selection requires a compliance procedure described at <https://rede.ecu.edu/oric/fcoi-guidance/> |

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| **Certification** (to be executed by an authorized institutional signatory of the subreceipient entity) | |
| The appropriate programmatic and administrative personnel of subrecipient institution involved in this grant application are aware of the prime sponsor’s consortium policy and are prepared to establish the necessary inter-institutional agreements consistent with that policy.  Subrecipient certifies, to the best of its knowledge, that the information it has provided is true and correct and it:   * is not currently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded for award of federal grants or contracts; is not, nor are its PI/PD, key personnel and any other employee(s) or students) planning to participate in the project currently debarred, suspended, proposed for debarment, or declared ineligible for award of federal grants or contracts; * is not presently indicted or otherwise criminally or civilly charged by a government entity; * has not within three (3) years preceding, been convicted of or had a civil judgment rendered against it 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; in 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, or making false statements or receiving stolen property; * has confirmed that financial disclosures have been made related to the activities for all investigators who may be funded by or through a resulting agreement; * has confirmed all identified conflicts of interest have or will have been satisfactorily managed, reduced or eliminated in accordance with subrecipient’s or prime recipient’s conflict of interest policy prior to the expenditure of any funds under a resulting agreement; * *for entities outside the United States (applicable to NIH-funded projects)*: agrees that ECU shall have physical or electronic access, no less than annually (in alignment with timing requirements for Research Performance Progress Report submission), to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report. | |
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| Subrecipient Authorized Signatory (Date) | Name and Title of Authorized Signatory |