

Part 1: Prime Award and Subrecipient Information

Type of Request:	UVA PI Name:
Prime Sponsor:	Subrecipient Entity Legal Name:
Other Sponsor Name:	Subrecipient PI Name:
Project Title:	Sponsor Award # / FAIN:
	UVA Award #:
	UVA Parent Project #:

Part 2: New Subaward Request

Complete for new subaward requests only, skip to Part 3 for modifications

Subaward Period of Performance (Budget Period):

Start Date End Date

Amount Funded this Action:

UVA F&A allowed on the first \$25k

Estimated Total Project Period:

Start Date End Date

Estimated Total Budget:

For multi-year subawards, OSP will fund the subaward in yearly increments.

1. Does the Subrecipient's work involve human subjects and/or vertebrate animals?

No Human Subjects or Vertebrate Animals Human S

Human Subjects Choose one:

Human Subjects Exemption (attach if available)

Subrecipient IRB Approval (attach if available)

UVA acting as sIRB (attach UVA IRB Approval if available)

sIRB Approval (attach if available)

Approval will be sought after year 1

Human Subjects Data (Note: IRB approval may be required)

Vertebrate Animals Choose one:

Subrecipient IACUC (attach if available)

Reliance Agreement in place

Approval will be sought after year 1

Remainder of this page left blank

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Part 3: Modification to an Existing Subaward

Complete for modification requests only. Skip to Part 4 if this is a new request.

1. Does this Subaward have a PO Number assigned?

Yes PO Number: No PO Number Assigned

Subaward Project Number

2.What is the new Period of Performance (Budget

or

No change in PoP

Period) for this subaward?

Original Start Date

New End Date

This is a No Cost Extension request

3. Will you be providing additional funds to the Subrecipient in this modification?

Select all that apply.

Incremental Funding: **Total Amount Funded**

Increment Amount for this Modification:

Calculated

Rebudgeting:

Rebudgeting Amount

Carryforward:

Carryforward Amount

4. Will you require any other changes for this subaward modification?

Select all that apply.

Change of Sub PI:

Previous Sub PI Name

New Sub PI Name

Early Termination:

Requested By

End Date

Other/Internal System Mod:

Detailed Request

5. Are there any changes to the previously provided Scope of Work, budget or budget justification?

Updated Subrecipient Scope of Work attached

Updated Subrecipient budget attached

Updated Subrecipient budget justification attached

No changes to Subrecipient Scope of Work, budget or budget justification

6. Does the Subrecipient's work involve human subjects and/or vertebrate animals?

No Human Subjects or Vertebrate Animals

Human Subjects (if available, please attach the current IRB document)

Vertebrate Animals (if available, please attach the current IACUC document)

Part 4: Contact Information, Certification and Approvals

This request and its attachments have been reviewed and approved by the undersigned. By signing this form, the School confirms funds and corresponding UVA indirect costs are available to be obligated to the sub-project.

UVA PI Name: UVA PI Email:	As the PI, you are responsible for assessing the technical adequacy of this Subrecipient, and their ability to manage federal programs, if applicable. How would you
UVA PI Email:	describe your previous experiences with them?
UVA PI Phone Number:	
UVA PI Address:	
	UVA PI Signature:
I confirm I have an up-to-date conflict of interest disclosure and CITI Training. https://research.virginia.edu/conflict-interest	Date:
Department Administrator Name:	School Administrator Name:
Dept. Admin. Email:	School Administrator Email:
Dept. Admin. Signature:	School Admin. Signature:
Date:	Date:
Contact Person for OSP Questions:	
Name:	Email:
Notes:	
Attachments Please provide all applicable attachments. OSP	
missing attachments which may cause a delay	, ,
Subrecipient's Scope of Work Subrecipient Budget (all years for new)	IRB Approval (Exemption, Subrecipient's, sIRB) IACUC Approval (Subrecipient's or Reliance Agreement)
Subrecipient Budget (all years for new) Subrecipient Budget Justification	Subrecipient Financial Conflict of Interest Disclosure(s)
Multiple Pl Plan (if applicable)	Subrecipient Consortium Commitment Form with attachments

Submit this form to OSP along with all attachments after all signatures are obtained. Attachments should be individual PDFs clearly labeled. One subaward request per email, please. Include in the email subject the UVA PI Name, Award Number and "Outgoing Subaward Request New/Mod"

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Data Sharing Plan (if applicable)