

SUBCONTRACT PROPOSAL FACE PAGE

This form DOES NOT constitute a contract. All subrecipients/subcontractors must complete this form when participating in a sponsored project with Downstate.

Pass-through Entity (PTE)/Prime Institution

	for the State University of New Yor		ealth Sciences University
SUBRECIPIENT INFORMAT	<u>rion</u>		
Subrecipient a non-US/For Subrecipient PI:	f the <u>FDP Expanded Clearinghouse</u> [reign Entity? Y N N		FCOI Clearinghouse
Place of Performance:			
Unique Entity ID:	EIN:	Performance Site Con	gressional District :
Project Period:	to to Total Indirect Costs:		
Total Direct Costs:	Total Indirect Costs:	Total Proj	ect Costs:
PROPOSAL DOCUMENTS			
☐ Scope of Work		☐ Letter of Support	
☐ Budget and Budget Justification		☐ Facilities and Resources	
☐ Biographical Sketches		□ Other:	
☐ Current and Pending (of	ther) support (If required)	Other:	
☐ Federally Negotiated Ra			
The Subrecipient activitie	s include:		
☐ Human subjects	_	\square Recombinant DNA	☐Stem Cells
•	n must be signed by the subrecipient's author	prized official/institutional represe	ntative (AOR), or individual with the
legal authority to sign on behalf	of the subrecipient.		
Final Updated Policy Guidance for to copies of all lab notebooks, all primary recipient with a frequent	s the National Institutes of Health, we, the su for Subaward/Consortium Written Agreemen Il data, and all documentation that supports ncy of no less than once per year, in alignmer access may be entirely electronic.	ts (<u>NOT-OD-23-182</u>). Non-U.S. enti the research outcomes as describe	ties will be required to provide access din the progress report, to the
policies regarding subawards ar	he appropriate programmatic and administr nd are prepared to establish the necessary in I prior to execution of a subaward agreemen	ter-institutional agreements consis	tent with those policies. Any work
Name and Title of the Subrecipi	ent's AOR Email		
Signature of the AOR			