

**DELAWARE STATE UNIVERSITY
OFFICE OF SPONSORED PROGRAMS
SUB-AWARD REQUEST FORM**
(Sub-recipient Monitoring)

DSU PROJECT INFORMATION

DSU Budget Number: DSU Prime Award No:
Prime Award Agency: CFDA No.:
DSU PI: Requisition No.:

SUB-AWARD PROJECT INFORMATION

Institution/Organization (Sub-recipient) Name and Address:

Sub-Award Period of Performance:

Sub-Award Project Title:

Sub-Award Amount (US Dollars):

Incremental Funding (if applicable):

Year 1:
Year 2:
Year 3:
Year 4:
Year 5:
Total

Cost Share Requirements (if applicable):

The following language will be included for reporting requirements unless otherwise specified below:

“Progress and Final Reports will be required and requested by University’s Project Director as needed.”

Alternate Reporting Requirements (if applicable):

Is Sub-recipient subject to OMB Circular A-133: Yes No

*If no, have Sub-recipient complete Sub-Award Questionnaire, provided at the end of this document, and attach.

PLEASE ATTACH THE FOLLOWING DOCUMENTS

- Sub-recipient/Federal Cognizant Agency F&A Rate Agreement (or web link)
Note: if the sub-recipient does not have a federally negotiated F&A Rate Agreement, they should not request F&A unless the organization appropriately and consistently treats all costs as direct costs to the projects and is capable of accounting for them as such (this would require OSP approval of the budget justification listing costs that are typically F&A costs as direct costs.)
- Scope of Work
- Budget
- Special Conditions (if applicable)
- Attachment 3
Please complete, under UNIVERSITY CONTACTS, the information for the DSU Principal Investigator and department Financial Contact. Also, under COLLABORATOR CONTACTS, please enter the Project Director and Authorized Official.
- Sub-Award Questionnaire (if applicable)