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| **award/contract #** | **deptid** | **fund** |  **project id** |
| **%** |  |  |  | **[ ]** Primary **[ ]** Subproject |
| **PI & DEPARTMENT CONTACT INFORMATION\*** |
| PI: |  | CONTACT: |  |
| DEPT: |  | PHONE: |       | FAX       |
| PHONE:  |       | FAX       | EMAIL:  |       |
| EMAIL: |       | MC: |      |
|  ***\****[ ]  ***Additional contacts attached.*** |
| **AGENCY INFORMATION** |
| SPONSOR:  | SPONSOR ID:      | REF AWARD # |
| AGENCY CONTACT NAME:       |
| EMAIL:       | PHONE:       | FAX:       |
| **AWARD ACTIONS**: |
| ***Allowable Start Spending Date:*** [ ]  As shown below; or *if different*, this date: **.** Determined by (initials):  |
| DATE | PERIOD  | DESCRIPTION | AMOUNT | CUMULATIVE |
|  |  |  [ ]  **Initial Award**  [ ]  **Advance Award**  |  |  |
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| **AWARD INFORMATION**: |
| Project Title:  |
| **Agreement Type**: [ ]  Grant **[ ]**  Contract[ ]  Coop Agrmt[ ]  SubGrant[ ]  SubContract[ ]  IPA[ ]  PO[ ]  Basic-Task | **Purpose**:[ ]  RES [ ]  Basic [ ]  Applied [ ]  Develop[ ]  INS[ ]  OSA | **Location:**[ ]  On-Campus[ ]  Off-Campus[ ]  Mag Lab | **F&A Rate**: **%**[ ]  F&A Cap       | **CFDA** #  [ ]  Federal Flow Thru [ ]  Program Income project required | **Cost Share and/or Effort**C/S Commited: [ ]  Yes [ ]  No C/S Budget required by award or requested by Dept: [ ]  Yes [ ]  NoEffort Commited: [ ]  Yes [ ]  No |
|  |  | **NSF Code**  | **F&A Base**: [ ]  N/A [ ]  MD [ ]  TD [ ]  REU [ ]  SLFR |  |  |
| **Method of Payment per Award Document**: [ ]  Cost Reimbursable[ ]  Fixed Price[ ]  Combo CR/FP | **For State (non-Fed) FP, FSU is a** [ ]  Subrecipient [ ]  Vendor  Initials/date: | Subcontract budgeted for one or more **subrecipients**? [ ]  Yes [ ]  No |
|  |  | Subcontract budgeted for one or more **vendors**? [ ]  Yes [ ]  No  |
| **OMNI BILLING SETUP**: |
| ***PRICING METHOD and PRODUCT****If you select this Pricing Method/Product* | ***CONTRACT TYPE****you must select one of these corresponding codes:* |
| [ ]  As Incurred CRB | [ ]  CRB (Cost Reimb) [ ]  FIXCOM (FP/CR) [ ]  LOC (Letter of Credit) [ ]  INTL (Internal) [ ]  PREPAID |
| [ ]  Fixed FXP DLV | [ ]  FIXED PRICE (Fixed Price) [ ]  CRF (Cost Reimb with Fixed Billing/Payment Amount) |
| Financial Reports or Invoicing | [ ]  Monthly [ ]  Quarterly [ ]  Semi-Annual [ ]  Annual [ ]  One-Time [ ]  Special Invoicing [ ]  Cost Share Report[ ]  Interim/Periodic with no specific due dates [ ]  Interim/Periodic with fixed schedule (dates specified on award pg #: .)[ ]  Final Due Date: . [ ]  FORFEITURE CLAUSE for Submission of Final Invoice # Days |

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| **TERMS/CONDITIONS** |

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| **TERM** | **ALLOWED / APPLIES** | **NOT ALLOWED / RESTRICTED** | **PRIOR APPROVAL REQUIRED** | **PAGE REFERENCE/CONFIRMATION NOTES** |
| **[ ]  RTC [ ]  FD [ ]  Exp Auth - Direct Federal** (including Agency-Specific terms) | [ ]  |  |  |  |
| **[ ]  RTC [ ]  FD [ ]  Exp Auth - Flow-Thru**(with Restrictions) | [ ]  |  |  |  |
| Rebudgeting | [ ]  | [ ]  | [ ]  |  |
| Carryover | [ ]  | [ ]  | [ ]  |  |
| Equipment | [ ]  | [ ]  | [ ]  |  |
| Food | [ ]  | [ ]  | [ ]  |  |
| Foreign Travel | [ ]  | [ ]  | [ ]  |  |
| Travel | [ ]  | [ ]  | [ ]  |  |
| Subcontracts | [ ]  | [ ]  | [ ]  |  |
| Purchase American made items | [ ]  |  |  |  |
| Fly American carriers | [ ]  |  |  |  |
| HHS Salary Cap | [ ]  |  |  | **[ ]  HHS L1 [ ]  HHS L2** |
| NIH K Award (Career Dev) | [ ]  |  |  |  |
| Time Extensions | [ ]  | [ ]  | [ ]  |  |
| Publications |  | [ ]  |  |  |
| NIH Public Access Policy | [ ]  |  |  |  |
| Unfavorable Terms Memo | [ ]  |  |  |  |
| DPAS DO Rated Order | [ ]  |  |  |  |
| DPAS DX Rated Order | [ ]  |  |  |  |

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| ATTRIBUTES |
| [ ]  EQUIP\_UR (FSU title w/restrictions) [ ]  EQUIP\_GF (Gov’t furnished) [ ]  EQUIP\_AA (Sponsor retains title) [ ]  EQUIP\_UU (FSU retains title) [ ]  EQUIP\_GG (Gov’t retains title) [ ]  EQUIP\_SS (See award for title) |
| [ ]  E-Verify terms applies [ ]  SECURE (Proj info is sensitive/secure per terms)[ ]  Exempt from NSF 2-mo. salary rule [ ]  ARRA Funds | Program Income Method: [ ]  Additive [ ]  Deductive [ ]  Add/Deduct [ ]  As Cost Sharing |
| [ ]  ALLOW\_INSTR (Allow instruction on RES) [ ]  ALLOW\_INSCS (Allow instruction as c/s on RES) [ ]  ALLOW\_RES (Allow research on INS or OSA)  |
| **Research Type:** [ ]  Basic [ ]  Applied [ ]  Development |
| **MILESTONES** - ***Enter all anticipated due dates even if all funds are not yet obligated. Dates will be verified with each amendment.*** |
| Technical Report – Progress [PRGRP] | [ ]  Annual |      ,      ,      ,      ,       |
| [ ]  Monthly | [ ]  Report due on the       day of each month project is active. (e.g. 15th, 21st, 31st) |
| [ ]  Quarterly | [ ]  Report due on last day of each quarter project is active. [ ]  See tagged due date(s) on page(s)       of the agreement. |
| [ ]  Interim | See tagged due date(s) on page(s)       of the agreement. |
| Technical Report – Final [TECRP] | [ ]  Final |       |
| Deliverables [DELIV]  | [ ]  Periodic | See tagged due date(s) on page(s)       of the agreement. |
| [ ]  Final |       |
| NSF Project Outcomes Report [NSFOR] | [ ]  Final |       |
| DD250 [DD250] | [ ]  SRS QA: This report is required to be submitted with tech reports or deliverables noted above. Use same due dates. |
| ARRA PI Report [RA\_PI](Enter on direct Federal awards only.) | [ ]  Quarterly | SRS QA: Enter 3/31, 6/30, 9/30, 12/31 each year project is active, thru end of qtr past expiration date.(e.g., expiration date 11/15/2013; quarterly report due 12/31/2013.) |
| Property Report [PRPRP] | [ ]  Annual |       ,       ,       ,       ,       ,       |
| [ ]  Final |       |
| Inventions Report [INVRP] | [ ]  Annual |       ,       ,       ,       ,       ,       |
| [ ]  Final |       |
| **Effort Commitment [EFCOM]** | [ ]  Entry | Enter **tomorrow’s** date as the Milestone Due Date.  |
|  |
| [ ]  New Subproject is required for each budget period or task. [ ]  New Award/Contract/Project is or may be required each year. |
| If Advance Award is not checked above and the award begin date is more than **2 weeks** earlier than today’s date, answer the following questions:1. Was an advance recommended to department? [ ]  Yes [ ]  No2. If the answer to #1 is Yes, what date was recommendation made?  3. If the answer to #1 is Yes, explain why the PI/dept refused an advance: 4. If the answer to #1 is No, explain why not:  |
| **Initial Award Setup Approvals**: |

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| --- | --- | --- | --- |
| SRS ADMIN Initials/Date | [ ]  Attachments uploaded | SRAS Accountant Initials/Date |  |
| SRS QAInitials/Date | [ ]  Fund Code verified | SRAS Coordinator Initials/Date |  |
| SRAS Project Setup Initials/Date |  | Completion notice emailed by Initials/Date |  |

Copy and attach last page of Proposal Transmittal Form or Department Request for New Subproject showing additional contacts, if any.