

Subrecipient Letter of Intent/Commitment Form – Massachusetts Institute of Technology

Pass-Through Entity Institution Information

PTE PI Name _____ Email _____ Phone _____
PTE Admin Contact Name _____ Email _____ Phone _____
PTE Institution _____ Opportunity # _____
Prime Sponsor _____
Project Title _____

Subrecipient Institution Information

Legal Org Name _____ UEI _____
Entity has previously received a subaward from MIT
Sub PI Name _____ Email _____ Phone _____
Performance Site Address _____
Project Period _____
Direct Costs _____ F&A Costs _____ F&A Rate _____ Total Costs _____

Subrecipient Contacts

Administrative _____ Email _____ Phone _____
Authorized Official _____ Email _____
Contracting Contact _____ Email _____ Phone _____

Project Compliance

Human subjects Approval date (M/D/Y) or pending: _____
Vertebrate Animals Approval date (M/D/Y) or pending: _____
Human Embryonic Stem Cells Approval date (M/D/Y) or pending: _____
Recombinant DNA Approval date (M/D/Y) or pending: _____
Select Agents Approval date (M/D/Y) or pending: _____
Conflict of Interest Policy Program Income Cost Sharing Amount: _____

In FDP Clearinghouse If no, attach F&A Rate Agreement or list URL: _____
 SOW Detailed Budget & Justification Other: _____

In signing below and offering to participate in this research program, the Subrecipient Institution certifies that neither they nor their principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from receiving funds from any federal department or agency and are not delinquent on any federal debt.

This proposal has been reviewed and approved by the appropriate official(s) of Subrecipient and certified to its accuracy and completeness. The appropriate programmatic and administrative personnel of Subrecipient involved in this application are aware of the prime awarding agency's policies, agree to accept the obligation to comply with award terms, conditions, and certifications, and is prepared to establish the necessary inter-institutional agreement consistent with that policy. Any terms or rates included in the proposal described herein are not binding upon the Pass-Through Entity. All terms and conditions between the parties will be outlined in a separate formal Agreement.

SUBRECIPIENT INSTITUTIONAL OFFICIAL:

Name and Title

Signature/Date