

**OFFICE OF SPONSORED PROGRAMS (OSP)
Consultant/Subcontract Approval Request (CSAR)**

Authorization is requested for the following: (*Note: Subcontracts to individuals will be issued to their home address and not place of business.*)

*Name: _____ SSN/TID: _____

** Agency Name: _____

Address: _____

Phone No.: _____ Fax No.: _____ Email: _____

Prime Contract No.: _____ Org Code.(s): _____ Acct code(s) _____

Period of Performance: _____ (Must be consistent with Prime, unless risk memo is attached)

**Foreign National? ___ Yes/ ___ No. If Yes, must provide copy of visa or permanent resident status.
Will individual complete Research in the United States (UAH) ___ Yes/ ___ No. If Yes, you must coordinate this through International Student and Scholar Services, UC116, 824-6055**

UAH GRA's and GTA's may not receive subcontracts as long as they are receiving GRA or GTA funding.

Attach Statement of Work or write in area provided on the reverse side of this form.

PAYMENT METHOD (Indicate method below.)

1. \$ _____ per _____ (hr/day/month) for _____ (hr/day/month) not to exceed \$ _____

2. Travel reimbursement only. Total travel reimbursement not to exceed \$ _____.

Transportation:

Air Fare (roundtrip coach): \$ _____

Mileage (@ \$0.575/mile): \$ _____

Lodging (_____ days): \$ _____

Meals (NTE \$60/avg. day for _____ days) \$ _____

Miscellaneous Expenses (itemized): \$ _____

3. Other: _____

TOTAL NOT TO EXCEED: \$ _____ ; TOTAL COST SHARE REQUIRED: \$ _____

Payment(s) will be made upon receipt of signed invoice(s) and **completion/submission** of subcontract requirements. **NOTE: Final invoice will not be processed until P.I. accepts deliverables or services performed in writing, and submission of completed/signed DD Form 882 or NASA Form C-3043 by consultant/subcontractor, if applicable.**

WRITTEN REPORTS/DELIVERABLES

_____ Monthly _____ Annual _____ Semi-Annual _____ Final Due NLT: _____

Other Deliverables (specify) _____ due not later than _____

* If issuing subcontract to an individual

** If issuing subcontract to a company/educational institution

STATEMENT OF WORK *(if insufficient space, please attach SOW to CSAR):* _____

CSAR PROCEDURES: For timely processing, it is requested that CSARs be received in OSP two weeks prior to the requested beginning period of performance. The CSAR should be complete including a detailed statement of work and the required department signatures. A copy of the consultant's/Key Personnel's vita/resume should be attached to the CSAR. Upon receipt, OSP submits the CSAR to the Office of Counsel and Security and Immigration as necessary. After approval is obtained, the subcontract document is submitted to the Principal Investigator for review and approval. After P.I. approval, the original subcontracts and appropriate certifications are transmitted to the consultant/subcontractor. When the subcontracts are returned, they will be fully executed by the Director, OSP. UAH is not obligated to pay a consultant/subcontractor who begins work without a fully executed subcontract or before the contract start date. **A P.I. DOES NOT HAVE THE AUTHORITY TO AUTHORIZE WORK IN ADVANCE OF THE UAH SUBCONTRACT EXECUTION.**

If you require an immediate start date, you may submit a justification along with a request for a letter of intent to authorize the consultant/subcontractor to begin work. If agency approval of the consultant/subcontractor is required, a risk memo with an alternative "2" or "3" account number must be submitted. If consultant/subcontract was not named in the proposal, PI must complete Certification form and attach to CSAR.

REQUIRED AUTHORIZATIONS

(Requesting department is responsible for obtaining these signatures)*

*Principal Investigator: Date

Office of Counsel: Date

*Department Chair: Date

Research Security/Immigration: Date

*Dean/Center Director: Date

Subcontract Administrator, OSP: Date

**VP for Research/Provost Date

Asst. VP Contracts & Grants: Date

** OSP will obtain the Provost or VP for Research Signature if applicable.

CERTIFICATION

Principal Investigator: _____ Subcontract No.: _____

Each Principal Investigator on all sponsored projects must complete this certification before the **consultant/subcontracts** can be processed by the Office of Sponsored Programs.

Full text versions of the University’s Scientific Misconduct Policy and Conflict of Interest Policy are available at: <https://www.uah.edu/policies>

Complete this certification for all consultant/subcontracts not proposed under this award.

CONFLICT OF INTEREST:

Please answer all questions below. If “yes” is the answer to any questions, send full details of the circumstances giving rise to the “yes” answer to the UAH Chief Compliance Officer. Any answer of “yes” on the questions posed will elicit review by the UAH Chief Compliance Officer, and if appropriate, your Department Chair, Dean, Center Director, Povost or Vice President for Research and Economic Development.

1. Will acceptance of this sponsored program interfere with meeting your obligations to students, faculty colleagues, or UAH? _____ yes _____ no

2. Do you, or any member of your immediate family, have or will have any affiliation, financial or otherwise, with the proposed external funding organization? _____ yes _____ no

3. Do you, or any member of your immediate family, have or will have any affiliation, financial or otherwise, with any subcontractor, or vendor, that will provide goods or services on this project? _____ yes _____ no

4. Other than as described in the proposal, do you plan to involve students in any capacity in any part of the proposed work during the course of this sponsored project? _____ yes _____ no

5. Do, or have, you, or any members of your immediate family, received anything of value; hold any position, including as an employee; or own any interest in, any publicly traded entity which is expected to provide goods or services in any manner for this proposed sponsored project? _____ yes _____ no

6. Do, or have, you, or any member of your immediate family, received anything of value; hold any position, including as an employee; or hold *any* ownership interest, with any non-publically traded entity which is expected to provide goods or services in any manner for this proposed sponsored project? _____ yes _____ no

7. Is any employee of UAH, or their immediate family members, or any business entity owned in whole or part by any employee of UAH, or their immediate family members, going to receive anything of value, other than their UAH salary compensation, as a result of this proposed sponsored project? _____ yes _____ no

PI signature: _____

Based on an answer of “yes” to any of the above questions and the PI’s explanation, the proposed **consultant/subcontracts** is:

Approved _____ Disapproved _____ Department Chairman _____ (date)
Approved _____ Disapproved _____ Dean/Center Director _____ (date)