Tuskegee University
Sponsored Programs Compliance Checklist

OSP No. ________________________________

________ Internal Proposal Routing Form – Date received: ________________________________

________ Abstract/Project Summary

________ Indirect Cost Rate Adjustment Form – Authorization/Date: __________________________

________ Are all required elements of the proposal included?

☐ Cover Sheet
☐Abstract
☐Complete Narrative
☐Budget
☐C.V.s
☐Statement of Current and Pending Support
☐Certifications
☐Other Sponsor Requirements

________ Budget/Budget Justification

☐Does the budget accurately reflect the work proposed?
☐Is it calculated correctly?
☐Are the correct fringe benefit and F&A cost rates used?
☐Are subawards/contractors budgeted? If so, please identify/verify.

☐ Subawards ☐Contractors (Vendors) Initial:__________

Date checked for debarment, suspension, etc. in SAM.gov: ______________________________

Date forwarded Subrecipient Commitment Form to subawardee: __________________________

Date returned: ________________________

________ Final proposal as submitted to funding agency

________ Notice of award/rejection – Date received: ________________________________
AWARD PROCESSING

________ Budget Set-Up/BAR # _____________ Date to Budget Office: ________________

________ CL#: ______________________________________________________________________

________ Orientation with Principal Investigator – Date: ________________________________
(Review terms and conditions, reporting, budget shifts/revisions, and closeout)

____________________________________  ________________________________
OSP Signature                                           PI Signature

____________________________________  ________________________________
Date                                                                                   Date