

**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