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Attach this form to the PIAF when there is one or more outgoing subawards included in the proposal budget.

 Proposal Information

 PI/PD First Last Name
 Department
 Total Proposal Budget (LC)

 Sponsor
 Proposal ID
 Total Subawards

 Requested Start Date
 Requested End Date
 % of Total Budget as subawards

CO-PI/Project Director First Last Name	Administrator Name	Subrecipient Budget
Institution/Organization Name	Location (City, State)	Subrecipient Cost Share
Requested Start Date	Requested End Date	Total Sub Project Cost (sum of above)
Required Attachments	Notes	
IDC Rate Agreement or equivalent Budget Budget Justification Commitment Form/Letter from AOR Scope of Work Sub vs. Contractor determination form		

Subrecipient Information CO-PI/Project Director First Last Name **Administrator Name Subrecipient Budget** Location (City, State) Institution/Organization Name **Subrecipient Cost Share** Requested End Date Total Sub Project Cost (sum of above) **Requested Start Date Notes Required Attachments** IDC Rate Agreement or equivalent Budget **Budget Justification** Commitment Form/Letter from AOR Scope of Work Sub vs. Contractor determination form

Subrecipient Information CO-PI/Project Director First Last Name **Administrator Name Subrecipient Budget** Institution/Organization Name Location (City, State) **Subrecipient Cost Share Requested End Date** Total Sub Project Cost (sum of above) **Requested Start Date** Notes **Required Attachments** IDC Rate Agreement or equivalent Budget **Budget Justification** Commitment Form/Letter from AOR Scope of Work Sub vs. Contractor determination form