Office of Research and Sponsored Programs Facilities & Admin Cost (F&A) Voluntary Rate Reduction Request Form

RSP Use Only -

Date Submitted: _____

☐ Approved ☐ Denied

1. Consult the Guidance for Recovering Facilities and Administrative Costs for University Administered Sponsored Grants, Agreements, and Contracts document, available at the RSP website https://rsp.uni.edu or contact an RSP staff member for assistance.
2. Complete Part A and Part B, sign in Part C, and obtain signatures from the appropriate administrators listed in Part C.
3. Submit to RSP ***at least 2 weeks*** prior to proposal submission. Send the completed form to the Office of Research and Sponsored Programs, 0394, or by emailing it to rsp@uni.edu.
4. If approved, attach a copy of the approved request to the Cayuse Proposal Form.

Part A. Information

Principal Investigator/Project Director (PI/PD):

Dept./Org. to which grant account will be assigned:

Proposal Title:

Proposal Due Date: Sponsor:

If subaward, Sponsor's Sponsor:

What is the sponsor's published policy regarding F&A costs? (attach documentation)

Name, e-mail address and telephone number of sponsor's contact to verify F&A rate/policy:

F&A rate requested:_____% Base to which rate is applied: ☐ Total Direct Costs ☐Modified Total Direct Costs

Reason for this request: (Refer to guidelines)

Part B. Financial Impact

	Budget Periods:	
Proposed Budget Totals:	**First Year**	**Total Years**
a) Total Direct Costs (TDC or MTDC, whichever applies)	$	$
F&A (Indirect) Costs:	**First Year**	**Total Years**
b) F&A Costs at UNI's full rate (36.7% x line a)	$	$
c) F&A Costs at requested rate (% x line a)	$	$
d) Loss of F&A Costs to UNI (line b - c)	**$**	**$**
Incentive Fund Costs:	**First Year**	**Total Years**
e) Loss of PI Incentive Funds (10.5% x line d)	**$**	**$**
f) Loss of Dept. Head/Director Incentive Funds (5.25% x line d)	**$**	**$**
g) Loss of Dean Incentive Funds (5.25% x line d)	**$**	**$**

Part C. Certifications

_____ _____
PI/PD's Signature Date

Endorsed by:

_____ _____ _____ _____
Department Head/Director Date Dean/Division VP Date

☐ Denied ☐ Approved ☐ See below for approval/denial details

☐ Forwarded to the Office of the Provost for Consideration

☐ F&A rate approved for forwarding proposal to Sponsor: _____% Base: ☐ TDC ☐ MTDC

_____ _____
Associate VP for Research & Sponsored Programs Date

_____ _____
Provost & Executive VP for Academic Affairs (if applicable) Date

Approval/Denial Details: