Guide Contents

Purpose & Use .............................................................................................................................................. 2
Information Needed ....................................................................................................................................... 2
Form Routing .................................................................................................................................................. 2
  Statutes ....................................................................................................................................................... 2
    • DRAFT .................................................................................................................................................. 2
    • SAVED .................................................................................................................................................. 2
    • SUBMITTED ....................................................................................................................................... 2
    • REJECTED ................................................................................................................................-------- 3
    • APPROVED ...................................................................................................................................... 3
Recipients ..................................................................................................................................................... 3
  • Email To .............................................................................................................................................. 3
Initiator Instructions by Section .................................................................................................................... 3
  Program ..................................................................................................................................................... 3
  Subrecipient or Vendor/Contractual Services .......................................................................................... 4
  UNO Prime Award Information ................................................................................................................ 5
  Subrecipient Information .......................................................................................................................... 5
  Vendor Principal Investigator Information ............................................................................................... 6
  Subcontract Information ........................................................................................................................... 7
Attachments ................................................................................................................................................... 7
Comments (Optional) ................................................................................................................................ 8
PI Certification & Signature ........................................................................................................................ 8
Approver Instructions by Action (Office of Research) .................................................................................. 9
  Comments (Optional) ................................................................................................................................ 9
  Approve Request .................................................................................................................................. 9
  Reject Request ................................................................................................................................... 9
Contacts ....................................................................................................................................................... 10
  Technical Issues .................................................................................................................................... 10
  Research Policy/Scenario Questions ....................................................................................................... 10
Document Notes .......................................................................................................................................... 11
Purpose & Use

The Contractual Services/Vendor Agreement Draft Request form is used to request that the Office of Research begin drafting a contractual services or vendor agreement. Do not use this form to request subawards.

Information Needed

- PI contact information
- Characteristics of relationship with potential vendor
- UNO prime award information
- Vendor contact information
- Vendor tax information
- Contact information for vendor’s signing authority
- Contact information and resume for vendor’s PI
- Project information for proposed subcontract
- Attachments:
  - Statement of Work
  - Deliverables
  - Budget
  - Performance Measures
  - Cost Benefit Analysis
  - Monitoring Plan
  - Goals & Objectives

Form Routing

DRAFT

The form opens in Draft status and can be edited by the initiator. Once the form is submitted, it will no longer be in Draft status.

SAVED

If the initiator edits the form and submits it without the PI’s signature, the form will enter Saved status.

The initiator can save progress on Subaward Draft Requests by clicking the Save for Later button without signing. SharePoint will automatically email a copy of the Saved form to the initiator.

If someone initiates a form on behalf of a PI, the initiator may click the Save for Later button to submit without signing it then forward the resulting email to the PI for their signature.

The next time a Saved form loads, the form will automatically switch to Draft status.

SUBMITTED

If the form is submitted with the PI’s signature, the form will enter Submitted status.
The initiator (and the PI, if different) will receive an email confirming submission of the form. The request will forward to the Office of Research for processing.

REJECTED
If a form is rejected by any party, the form will enter Rejected status. The initiator (and the PI, if different) will receive notification of the rejected form via email.

APPROVED
If a submitted form is approved by the Office of Research, the form will enter Approved status. The initiator (and the PI, if different) will receive notification of the approved form via email.

Recipients
- SAVED
  - Initiator
  - PI (if different)
- SUBMITTED
  - Initiator
  - PI (if different)
  - Office of Research
- REJECTED
  - Initiator
  - PI (if different)
- APPROVED
  - Initiator
  - PI (if different)

Email To
If the form needs to be sent to any recipients other than those listed above, any user can add any UNO email address into the Email To field and then submit the form. The user will be copied on an email sent to the entered email address.

Initiator Instructions by Section

Program

<table>
<thead>
<tr>
<th>UNO Principal Investigator Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name:</td>
</tr>
<tr>
<td>Last Name:</td>
</tr>
<tr>
<td>UNO Email Address:</td>
</tr>
<tr>
<td>Phone Number:</td>
</tr>
<tr>
<td>College:</td>
</tr>
<tr>
<td>Department:</td>
</tr>
</tbody>
</table>

1. **First Name**: Enter the first name of the UNO PI.
2. **Last Name**: Enter the last name of the UNO PI.
3. **UNO Email Address**: Enter the UNO email address for the UNO PI.
4. **Phone Number**: Enter a phone number for the UNO PI.
5. **College:** Select the PI’s college from the dropdown menu.

6. **Department:** Select the PI’s department from the dropdown menu.

7. **Save for Later:** Click the button at any time after entering the above information to save the form for later.

**Subrecipient or Vendor/Contractual Services**

<table>
<thead>
<tr>
<th>Subrecipient or Vendor/Professional Services?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete the section below to determine whether or not this form is necessary. Once the outside entity type has been determined, the rest of the form will appear.</td>
</tr>
</tbody>
</table>

- Review definitions

**Does the outside entity:**

- Determine who is eligible to receive what Federal assistance? ☐ Yes ☐ No
- Have its performance measured in relation to whether objectives of a Federal program were met? ☐ Yes ☐ No
- Have responsibility for programmatic decision-making? ☐ Yes ☐ No
- In accordance with its agreement, use Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity? ☐ Yes ☐ No

**Or, does the outside entity:**

- Provide goods and services within normal business operations? ☐ Yes ☐ No
- Provide similar goods or services to many different purchasers? ☐ Yes ☐ No
- Normally operate in a competitive environment? ☐ Yes ☐ No
- Provide goods or services that are ancillary to the operation of the Federal program? ☐ Yes ☐ No

**Determine Classification**

1. **Review Definitions:** Click the link to review definitions of key terms used in this section.

2. Answer the yes or no questions listed by selecting the corresponding radio button.

3. **Determine Classification:** Click the button; the form will automatically determine whether the outside entity should be classified as a subrecipient or a vendor.

4. **Red Light:** If you are given a red light, the outside entity is likely a subrecipient. You will need to fill out the **Subaward Draft Request** form.

5. **Yellow Light:** If you are given a yellow light, the Office of Research requires more information to make the determination. Continue filling out the form.

6. **Green Light:** If you are given a green light, the outside entity is likely a vendor. Continue filling out the form.
UNO Prime Award Information

1. **Award Number**: Enter the Workday award number for the UNO prime award.
2. **Start Date**: Enter or select the start date for the UNO prime award.
3. **End Date**: Enter or select the end date for the UNO prime award.
4. **Grant Number**: Enter the Workday grant number for the grant associated with the UNO prime award.
5. Indicate whether the funds were awarded from a federal, state, local, or private entity.
   a. If a state or local entity, indicate whether the funds were awarded by a Louisiana/local entity.
6. Indicate whether the funds are pass-through.

Subrecipient Information

1. **Vendor Name**: Enter the name of the vendor.
2. **Address**: Enter the address for the vendor, selecting the state from the dropdown menu.
3. **Email Address**: Enter an email address for the vendor.
4. **Phone Number**: Enter a phone number for the vendor.
5. **Fax Number**: If desired or known, enter a fax number for the vendor.
6. **Federal Tax ID or SSN**: Enter the Federal tax ID or SSN for the vendor.
7. **DUNS Number**: Enter the DUNS number for the vendor.
Vendor Signing Authority Information

<table>
<thead>
<tr>
<th>Vendor Signing Authority Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name:</td>
</tr>
<tr>
<td>Last Name:</td>
</tr>
<tr>
<td>Job Title:</td>
</tr>
<tr>
<td>Email Address:</td>
</tr>
<tr>
<td>Phone Number:</td>
</tr>
</tbody>
</table>

1. **First Name:** Enter the first name of the individual who has signing authority for the vendor.
2. **Last Name:** Enter the last name of the individual who has signing authority for the vendor.
3. **Job Title:** Enter the job title of the individual who has signing authority for the vendor.
4. **Email Address:** Enter an email address for the individual who has signing authority for the vendor.
5. **Phone Number:** Enter a phone number for the individual who has signing authority for the vendor.

Vendor Principal Investigator Information

<table>
<thead>
<tr>
<th>Vendor's Principal Investigator Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name:</td>
</tr>
<tr>
<td>Last Name:</td>
</tr>
<tr>
<td>Email:</td>
</tr>
<tr>
<td>Resume:</td>
</tr>
</tbody>
</table>

1. **First Name:** Enter the first name of the individual who will serve as the PI for the vendor.
2. **Last Name:** Enter the last name of the individual who will serve as the PI for the vendor.
3. **Email:** Enter an email address for the individual who will serve as the PI for the vendor.
4. **Resume:** Attach a copy of the PI’s resume.
Subcontract Information

1. **Performance Start Date**: Enter or select the date when work on the subcontract will begin.

2. **Performance End Date**: Enter or select the date when work on the subcontract will conclude.

3. **Total Estimated Costs**: Enter the total amount that work on the subcontract is estimated to cost.

4. **Cost Sharing**: Enter the amount that is expected to be provided as cost share.

5. **Technical/Progress Reports**: Indicate the intended frequency and format for technical and/or progress reports.

6. Indicate whether or not the subcontract will involve human subjects, animal subjects, intellectual property, nondisclosure agreements, export controls, or any other restrictions or reporting requirements.

Attachments

- **Statement of Work**: Describe in detail what services the vendor will perform.
- **Deliverables**: Detail the expected results from the vendor and a schedule for these deliverables.
- **Budget**: If the subcontract is cost reimbursable, complete an itemized budget and indicate invoicing frequency. If the subcontract is fixed price, indicate the invoicing schedule and whether it ties into any of the deliverables’ due dates. List any related tasks.
- **Performance Measures**: Explain the methodology to be used to monitor the vendor’s performance. Be specific. This information will be used to complete the evaluation form at the end of the award.
1. **Statement of Work**: Attach a detailed statement of what services the vendor will perform.

2. **Deliverables**: Attach the expected results and a schedule for those deliverables.

3. **Budget**: Attach a budget as requested.

4. **Performance Measures**: Attach an explanation of the methodology to be used to monitor the vendor’s performance.

5. **Cost Benefit Analysis**: Attach the cost-benefit analysis that has been conducted.

6. **Monitoring Plan**: Attach a description of how the subaward will be evaluated and observed.

7. **Goals & Objectives**: Attach an explanation of what will be accomplished by or for the vendor and how.

8. **Additional/Optional Attachments**: Add any other attachments you deem relevant.

**Comments (Optional)**

1. **Add comments**: If relevant, click the **Add comments** link to add a comment to the form.

2. Type your comment in the box that appears. Your username and the date will auto-populate beneath the comment.

3. **Add more comments**: If necessary, click the **Add more comments** link to add more comments.

**PI Certification & Signature**

1. Read the certification.

2. **Save for Later**: If you wish to continue working on the form, click the button to save the form without locking it.

3. **Signature**: Enter your name to sign the form. Your username and the date will auto-populate. All previous fields will lock.
4. **Submit**: After signing the form, click the Submit button in the ribbon at the top.

5. You will receive an email confirmation of your submission.

**Approver Instructions by Action (Office of Research)**

**Comments (Optional)**

1. **Add comments**: If relevant, click the Add comments link to add a comment to the form.

2. Type your comment in the box that appears. Your username and the date will auto-populate beneath the comment.

3. **Add more comments**: If necessary, click the Add more comments link to add more comments.

**Approve Request**

<table>
<thead>
<tr>
<th>Office of Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature:</td>
</tr>
</tbody>
</table>

1. To approve the Subcontract/Contractual Services Draft Request, scroll down to the Office of Research section.

2. **Signature**: Sign the form. Your username and the date will auto-populate.

3. **Submit**: After signing the form, click the Submit button in the ribbon at the top.

4. The PI (and the initiator, if different) will be notified via email.

**Reject Request**

<table>
<thead>
<tr>
<th>Reason for Rejecting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sign:</td>
</tr>
</tbody>
</table>

1. To reject the Subcontract/Contractual Services Draft Request, click Reject this form at the top of the form.

2. **Reason for Rejecting**: You must enter a reason for the rejection. This language will be provided to the PI (and to the initiator, if different).

3. **Sign**: Sign the form. Your username and the date will auto-populate.

4. **Submit**: After signing the form, click the Submit button in the ribbon at the top.

5. The PI (and the initiator, if different) will receive an email similar to below.
Contacts

Technical Issues

If you encounter a technical issue with the SharePoint form, contact Julie Landry at jelandr1@uno.edu.

Research Policy/Scenario Questions

If you have a question about your submission or its results, contact the appropriate member of your service team as indicated on the Office of Research website.