

Pre-Award Policy - Proposal Submission Guidelines  
for Subcontract and Consultant Agreements -  
Items Required for Subcontract/Consortium Agreements

*Form for OSP Use Only, Do Not Send to Sponsor*

**Pre Award Policy - Items Required for Subcontract Agreements**

**Subcontract/Consortium Definition:** Any agreement, other than one involving an employer-employee relationship, entered into by a prime contractor (i.e. CMH) with another institution or vendor calling for supplies or services required solely for the performance of the prime contract (i.e. project) or another subcontract.

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|---|--------------------------|
| 1. NIH Face Page signed off by Subcontract Organization Institutional Official (Applicable to all sponsors including non NIH proposals) | <input type="checkbox"/> |
| 2. Clear Statement of Work (For subcontract site only)  | <input type="checkbox"/> |
| 3. Detailed budget for each year of proposed work with subcontract organization   | <input type="checkbox"/> |
| 4. Budget Justification/Narrative for proposed work with subcontract organization   | <input type="checkbox"/> |
| 5. Checklist Page from Subcontract Organization   | <input type="checkbox"/> |
| 6. NIH Biographical Sketch for subcontract key personnel  | <input type="checkbox"/> |

**Just In Time Information Needed:**

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|--|--------------------------|
| 1. Revised budget (if applicable) to reflect award amount      | <input type="checkbox"/> |
| 2. Applicable Compliance Committee Approvals (IRB, IACUC, IBC) | <input type="checkbox"/> |
| 3. Other Support for all key personnel at Subcontract site     | <input type="checkbox"/> |

**Pre Award Policy - Items Required for Consultant Agreements**

**Consultant Definition:** An individual who provides professional advice or services for a fee, but normally not as an employee of the engaging party.

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| 1. Contact Information: Name, Home Address, Phone, Email and Social Security Number                              | <input type="checkbox"/> |
| 2. Clear Statement of Work   | <input type="checkbox"/> |
| 3. Performance Period for Consultant   | <input type="checkbox"/> |
| 4. Fee per hour or day   | <input type="checkbox"/> |
| 5. Number of hours worked  | <input type="checkbox"/> |
| 6. Total Compensation (including travel costs breakdown, if applicable and other costs breakdown, if applicable) | <input type="checkbox"/> |