Research Funding Services
Brown Bag

September 30, 2013
11:45 am – 12:45 pm
Hiatt Auditorium (S1-608)

Agenda

• NIH Public Access Policy Resources - Rebecca Reznik-Zellen
• NIH Update
  – Federal Budget – Potential Government Shutdown
  – NOT-OD-13-120: NIH Domestic Awards to Transition to Payment Management System Subaccounts in FY 2014 and FY 2015
  – New Form Set C: Planned Enrollment Report & Appendices Issues in Cayuse
  – RPPR Update
  – NIH ASSIST Update
  – eRA Commons Registration Form
• Updated Foreign Project Registration (FPR) Form
• Research Administration Training Program Upcoming Courses
• Upcoming Cayuse Webinars
• Proposal & Progress Report Statistics
NIH Public Access Policy

Requirement

• All NIH-funded researchers must submit (or have submitted) their final peer-reviewed journal manuscript to PubMed Central **upon acceptance** for publication.

• Articles must be publicly available through PubMed Central **no later than** 12 months after publication.

http://publicaccess.nih.gov/

NIH Public Access Compliance

Beginning April 2013

• Awards (non-competing continuation) will be delayed until grantees demonstrate compliance.

• If submitting progress reports using **RPPR**, you have to use **My NCBI** to report publications.

• If submitting progress reports using **PHS 2590**, you have to use **My NCBI** to report publications.

http://publicaccess.nih.gov/
Compliance Process

- Manuscript is accepted.
- Manuscript is submitted to PubMed Central.
  1. By Publisher
  2. By Author
- If necessary*, manuscript is approved by author.
- PMCID is cited in progress reports, applications, and proposals via My Bibliography.

*See Submission Methods and How To Demonstrate Compliance (Sarli & Lewis, 2010)

Cheat Sheet

- PubMed
- PubMed Central
- NHMS
- My NCBI/My BIBLO
- eRA Commons
- Citation database
- Full-text article database
- NIH Manuscript Submission System
- Feature of NCBI databases, including PubMed
- Reference tool for managing personal citations
- NIH grant reporting toolset
- Article accepted for publication
- Indicate NIH funding on copyright transfer agreement or follow publisher’s instructions
- Submit manuscript to NIH Manuscript Submission System
- Approve final manuscript
- Add citation from PubMed to your MyBibliography

For assistance and instruction:
http://libraryguides.umassmed.edu/NIH_MyBib

DO NOT WAIT UNTIL REPORTS ARE DUE!
My NCBI’s My Bibliography Class

http://libraryguides.umassmed.edu/NIH_MyBib

UMMS Library Contacts

Research & Scholarly Communication Services

- Sally Gore, X6-1966
  sally.gore@umassmed.edu
- Lisa Palmer, X6-4368
  lisa.palmer@umassmed.edu
- Rebecca Reznik-Zellen, X6-6810
  rebecca.reznik-zellen@umassmed.edu
Federal Budget - Potential Government Shutdown

• Federal FY 2013 ends today and an Appropriation Act for FY2014 has not yet been passed.

• If there is a lapse in funding, DHHS staff will not be available to provide routine administrative support services.

• DHHS will maintain the Payment Management System in an operational status to continue processing drawdowns.

• DHHS anticipates that Grants.gov will remain in an operational status, but with reduced federal support staff presence, should a lapse in appropriations occur.
  – Grants.gov will only accept and store NIH applications.
  – The NIH applications will not be processed further until such time as the authority and funding to return to normal business operations are restored.

• DHHS anticipates the Grants.gov Contact Center will remain available, and provide assistance to callers.

NIH Domestic Awards to Transition to Payment Management System Subaccounts in FY 2014 and FY 2015

Notice Number: NOT-OD-13-120 Release Date: September 26, 2013

• Changes the implementation timeline previously announced in NOT-OD-13-112 for the NIH transition to Payment Management System (PMS) subaccounts.

• NIH will transition all award payments to PMS subaccounts by the end of FY 2015. To help minimize grantee burden for the transition in FY 2014, NIH will only establish PMS subaccounts for domestic awards that have new document numbers.

• NIH has delayed the implementation for non-competing continuation awards to October 1, 2014, to allow grantees a year to prepare their systems to accommodate the changes.

## Type of NIH Awards Impacted By Payment Management System Changes

- **Federal Fiscal Year 2014** (10/1/13 – 9/30/14)
  - Type 1 and Type 2 Awards
  - New and renewal (previously known as competing continuation) awards.
    - Will be set up as a new award with no transition or split award
- **Federal Fiscal Year 2015** (10/1/14 – 9/30/15)
  - Type 5 and Type 8 Awards
  - Non-competing continuation awards (5) and change of IC continuations (8)
    - Non-competing continuations will be awarded as **Type 4** awards (funded extension awards) during the transition period.
    - UMass Pre-award and Post-award offices will develop an operational plan to address the FFY 2015 changes.

## New Form Set C: Planned Enrollment Report & Appendices Issues in Cayuse

- Planned Enrollment Report (PER) must be completed before the proposal is routed to RFS.
- Comment field in the PER must be filled or it will generate an error upon validation in Cayuse.
- Any revisions to PER will require rerouting to RFS for approval since it is part of the business section of the proposal.
- Appendices
  - If you delete and replace an existing appendix item, the original may still show in the proposal.
  - This is a known Cayuse error. Call RFS and a member of the Grants Team will copy the existing proposal into a copy which should show the correct appendices.
**RPPR Update**

- UMMS has received guidance from NIH to submit a RPPR in addition to the progress report submitted with the institutional transfer packet.
- Current process is to submit an institutional transfer packet that includes a progress report.
- Once relinquishment is processed by NIH, the RPPR flag is generated under the UMMS in the Commons.
- The RPPR must be completed and submitted in order to issue the current year award.

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**NIH ASSIST Update**

- **Recommendations**
  - Before you start, have the shell of your project components completed (Projects/Cores/Leads)
  - Complete an internal budget form or an excel spreadsheet for each component
  - Have your fringe and F&A calculations available for prime and sub sites
  - Keep a browser open to complete additional site information
- **System Positives**
  - Auto generated Composite Budget
  - Auto generated Table of Contents
  - Component Summary (Summarizes Components/Compliance Certifications)
  - Auto fill for Key Personnel by Commons ID
- **9/25/13 Submission: Departmental & RFS Perspectives**
- **RFS Training & Guidance**
Updated eRA Commons Registration Form

- Revised to include new user role assignments
- Updated instructions
- Revised form is available on the RFS Forms web page.
- Registrations should be submitted to Denise DeGabriele-Lindberg.

Form available at the Office of Global Health website:
http://www.umassmed.edu/globalhealth/index.aspx
# Research Administration Training Program

## Upcoming Courses

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<tr>
<th>Course</th>
<th>Date</th>
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<th>Location</th>
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<td>Creating Proposals &amp; Managing Grants in PeopleSoft</td>
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To register go to: [http://i.umassmed.edu/Inside/registration/Register.aspx?pid=77](http://i.umassmed.edu/Inside/registration/Register.aspx?pid=77)

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## Upcoming Cayuse Webinars

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<th>Webinar</th>
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<td>Tuesday, October 8th @ 10:00 AM Pacific Time (1:00 PM Eastern Time)</td>
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<td>Budgeting FAQs in Cayuse 424</td>
<td>Tuesday, October 22nd @ 1:00 PM Pacific Time (4:00 PM Eastern Time)</td>
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Register at: [http://evisions.com/Services/WebBasedTraining.aspx](http://evisions.com/Services/WebBasedTraining.aspx)
### PROPOSAL SUBMISSIONS TO RFS
August 2012 – August 2013

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### SUBMISSIONS TO RFS
August 2012 to August 2013 Comparison

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Legend:
- **On Time**: Received by RFS 5 days prior to the requested return date.
- **Late**: Received by RFS less than 5 days prior to the requested return date.
- **After the Fact**: Received by RFS after the requested return date.
- **Expedited Request**: Received by RFS with 3 days or less to review before requested return date.
## PROGRESS REPORT SUBMISSIONS TO RFS
### August 2012 – August 2013

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## SUBMISSIONS TO RFS
### August 2012 to August 2013 Comparison

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For assistance and instruction: http://libraryguides.umassmed.edu/NIH_MyBib

DO NOT WAIT UNTIL REPORTS ARE DUE!
September 26, 2013

Dear Grantee:

As you are aware, the Government Fiscal Year (FY) 2013 ends on September 30, 2013 and an Appropriation Act for FY2014 has not yet been passed. The Administration strongly believes that a lapse in appropriations should not occur, and that there is enough time for Congress to act to prevent a lapse. However, prudent management requires that we prepare for an orderly execution of contingency plans in the unfortunate event of a lapse. In the event a continuing resolution or a FY2014 budget is not passed and a lapse of funding occurs, I wanted to provide you with information related to our grant administration processes.

Your particular grant program is funded by appropriations that will be affected by a government shutdown. As a result, if there is a lapse in funding, HHS’ NIH staff will not be available to provide routine administrative support services. HHS will, however, maintain the Payment Management System in an operational status to continue processing grant drawdown requests. Given that you have received your award prior to the gap in funding, you may be able to continue drawing funds from prior awards during an appropriations lapse. If you received your notice of grant award with restrictive terms and conditions, or if your drawdown request triggers one of the Payment Management System edit checks and/or the drawdown limit controls, you will not be able to drawdown funds.

If you are considering submitting an application for additional HHS federal assistance funding, please be advised that the Grants.gov system will be operational during a lapse in funding and will be accepting applications from prospective grantees. However, for NIH applications the Grants.gov system will only accept and store applications. Applications will not be processed further until such time as the authority and funding to return to normal business operations are restored.

Please check the website at www.hhs.gov for updates. Thank you for your assistance with this period of a potential government shut-down and your ongoing support of the NIH.

Sally J. Rockey, Ph.D.
NIH Deputy Director for Extramural Research
rockeysa@od.nih.gov
Notice Number: NOT-OD-13-120

Key Dates
Release Date: September 26, 2013

Related Announcements
NOT-OD-13-112
NOT-OD-13-111
NOT-OD-13-078
NOT-OD-12-139

Issued by
National Institutes of Health (NIH)

Purpose
This guide notice alerts grantees to a change in the implementation timeline, previously announced in NOT-OD-13-112, for the NIH transition to new U.S. Department of Health and Human Services (HHS) payment policies for grant awards and use of Payment Management System (PMS) subaccounts.

NIH will transition all award payments to the PMS subaccounts by the end of FY 2015. To help minimize grantee burden for the transition in FY 2014, NIH will only establish PMS subaccounts for domestic awards that have new document numbers. However, in response to feedback from the grantee community, NIH has delayed the implementation for non-competing continuation awards to October 1, 2014, to allow grantees a year to prepare their systems to accommodate the changes.

This Guide Notice only applies to domestic awards. NIH transitioned the payment of grant awards to foreign institutions to PMS subaccounts throughout FY 2013; see NOT-OD-12-139 and NOT-OD-13-019. Also, see companion Notice NOT-OD-13-111 on transitioning payment of Federal Institutions and Individual Fellowships at Federal and Foreign Institutions to PMS subaccounts.

Background
Most payments for NIH domestic awards are currently made via pooled accounts in PMS, which is a centralized grants payment and cash management system operated by the Division of Payment Management (DPM) HHS.

Payments for NIH awards to Federal institutions, Federal Fellows and Foreign Fellows are currently made directly by the Office of Financial Management (OFM), NIH.

Revised Implementation Timeline
The transition of all NIH awards to PMS subaccounts is anticipated to take place in FY14 and FY15.

FY2014 Implementation Plans for Awards with New Document Numbers
Between October 1, 2013 and September 30, 2014, NIH will transition payment for all domestic awards with new document numbers (i.e., Type 1, Type 2, Type 4, Type 6, Type 7, and Type 9) from PMS pooled accounts (G accounts) to PMS subaccounts (P subaccounts). For these types of awards, PMS will establish subaccounts for each NIH award made on or after October 1, 2013. All subsequent non-competing continuation awards will be issued in subaccounts.

Anticipated Implementation Plans in FY2014 and FY2015 for Type 3 Awards
Please be aware that competitive revisions/supplements (Type 3s) issued to domestic awards in FY 2014 and FY 2015, will be issued in the same account as the parent award. If the parent award is in the pooled account at the time the Type 3 is issued, the Type 3 will be in the pooled account too. If the parent award was issued in a subaccount at the time the Type 3 is issued, the Type 3 will also be in the subaccount account.

Anticipated FY2015 Implementation Plans for All Other Domestic Awards
Between October 1, 2014 and September 30, 2015, NIH will transition payment for all continuing domestic awards (i.e., Type 5 and Type 8) awards that have not yet transitioned to subaccounts from PMS pooled accounts (G accounts) to PMS subaccounts (P subaccounts). For these types of awards, PMS will establish subaccounts for each NIH award made on or after October 1, 2014.

For domestic grants with a non-competing continuation year of funding in fiscal year (FY) 2015 (October 1, 2014 – September 30, 2015), NIH will use a technical process to shift the funding from PMS G accounts to PMS P subaccounts by issuing all FY 2015 non-competing continuation awards that have not yet transitioned to subaccounts as Type 4 awards (funded extension awards). This means that all domestic Type 5 awards (non-competing continuation awards) and Type 8 awards (non-competing continuation awards with a change of awarding Institute or Center), will be issued as Type 4s during the transition period. This enables NIH to separately track obligations and payments for grants that span the Federal FYs 2014 and 2015. In addition to changing the record Type and the document number for the FY 2015 award, NIH will change the project period end date of the FY 2014 award when the FY 2015 award is issued. The project period end date will be changed to the budget period end date. This effectively breaks the single competitive segment into two shorter "competitive segments." The change will be reflected in the eRA Commons; however, NIH will not issue a revised Notice of Award (NoA) for the FY 2014 award. Therefore, the FY 2014 award becomes the final year of the first "competitive segment" and requires final Federal Financial Report (FFR) expenditure data. If the award is under Streamlined Non-competing Award Process (SNAP), the grantee will be required to submit FFR expenditure data that covers the project period from the original start date through the new project period end date.

NIH will make this transition as seamless as possible for grantees and NIH staff. Records for non-competing continuation progress reports (Type 5s), or in rare instances Type 8s, that have not yet transitioned to subaccounts will be converted to Type 4s. The conversion will be processed internally by NIH. There will be no change to the due dates, submission, or review of progress reports for domestic awards for FY 2015.

Please see below for procedural changes in carryover of funds for non-competing continuation awards issued in FY 2015.

Non-competing continuation progress reports (Type 5s), or in rare instances Type 8s, that were converted to Type 4s to accommodate the change in method of payment from the pooled accounting to subaccounts, require a final FFR for the prior year(s) of the competitive segment before any carryover funds would be available for drawdown in the PMS. However, this requirement does not change the carryover authority listed in Section III of the NoA. If the award was issued with automatic carryover authority, OFM will automatically authorize the carryover in the PMS P subaccount equal to the amount of unobligated balance reported on the FFR.* If the award was issued without carryover authority, OFM will automatically transfer the unobligated balance reported on the FFR to the PMS P subaccount; however, the grantee will still be required to submit a prior approval request to use carryover funds as detailed in the NIH Grants Policy Statement, Section 8.1.1.1. If the request is approved, a revised NoA reflecting the approved carryover amount will be issued and the authorized amount will be reflected in PMS. Failure to submit FFR expenditure data in a timely manner may affect future funding.

*In accordance with existing policy, the GMO will review unobligated balances in excess of 25 percent of the total authorized amount for the budget period and may request additional information from the grantee. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the grantee’s authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset NIH funding for a subsequent budget period, or use a combination of these actions. The GMO’s decision about the disposition of the reported unobligated balance will be reflected in the terms and conditions of the NoA.

An FFR to report expenditure information is not required for Kirschstein-NRSA individual fellowship awards.

Change in Processing of Funds Requested for Awards in PMS Subaccounts that are 90 days Beyond the Project Period End Date

When a federal grant expires, recipients can only use remaining grant funds to liquidate expenses incurred during the performance period. Federal grants management policy specifies that within 90 days of the project period end date the grant recipient must submit its final financial report for the grant, unless the awarding agency extends the project period end date or the reporting period due date. See NIH Grants Policy Statement Section 8.6 for more information on the grantee responsibilities for timely closeout is a grantee responsibility.

In an effort to promote more timely financial closeout of awards, PMS will now hold payment requests for funds in subaccounts for awards that are 90 days or more beyond the project period end date. Funds requests for these awards will not be processed unless, and until, the awarding Agency has approved the payment request.

Frequently Asked Questions

NIH will post answers to frequently asked questions on the transition to PMS subaccounts on the following site: http://grants.nih.gov/grants/frequent_questions.htm under the Other Policies/Resource heading, Payment (PMS Subaccounts).

Inquiries

Please direct all inquiries to:

Division of Grants Policy
Office of Policy for Extramural Research Administration
Office of Extramural Research
National Institutes of Health
Telephone: 301-435-0949
Email: GrantsPolicy@od.nih.gov

Weekly TOC for this Announcement
NIH Funding Opportunities and Notices

Note: For help accessing PDF, RTF, MS Word, Excel, PowerPoint, Audio or Video files, see Help Downloading Files.
SF424 FORMS C-    Planned Enrollment Report

Must complete before routed to RFS

☑ Planned Enrollment Report

1

Click on green plus sign to open an enrollment table.

SF 424 FORMS C-

One study will be added:

If you go back into the proposal and do not see it, click on expand all. Note, it now shows that there is 1 Study.

In addition, a Comment must be added.

Appendix Materials:

If you delete and replace an existing appendix item, the original may still show in the proposal. This is a known Cayuse error. Call RFS and a member of the Grants Team will copy the existing proposal into a Copy which should show the correct appendices.
ASSIST FAQ’s

- **Q: Why is the R&R Budget form tab missing from my component?**
  
  A: You may not have the authority to view or edit budget data for the component. Have a Signing Official (SO) or someone with the Access Maintainer role check your privileges using the Manage Access action in ASSIST.

- **Why doesn't the Overall component include a budget form?**
  
  A: Electronic multi-project applications are made up of an Overall component that describes the entire application and some number of additional components where the work is actually carried out. Although the SF424 R&R Cover form includes an estimated Project Funding section that must be completed, the Overall component doesn't have a dedicated budget form that applicants can fill out. Instead, applicants fill out an R&R Budget form for each of the additional components and any related subaward budget forms. NIH systems present a summary of the budget information with the Overall component.

- **Q: Our organization’s F&A rate uses a modified total direct cost base which excludes sub-recipient charges after the first $25,000. How do I account for the first $25,000 in my multi-project budget?**
  
  A: Many negotiated F&A rate agreements use a modified total direct cost (MTDC) base rate and include the following language:

  "Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first $25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, student tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of $25,000."

  However, an issue has been identified with the system-generated Composite Budget Summary. When an application includes components that are for organizations that have different DUNS than the Applicant Organization DUNS, the Indirect Cost calculation may appear less than expected since the first $25,000 of those organization costs are not applied to the applicant budget. No action is required from the applicant, although applicants always have the option to document any concerns over system-calculated information in the budget justification of any component. The application review is not affected by this issue and NIH will correct the budget calculations administratively.
## Component Summary

<table>
<thead>
<tr>
<th>Components</th>
<th>Component Project Title</th>
<th>Contact PD/PI Name or Project Lead Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>T Cell Memory to Pathogens: Generation and Function</td>
<td>SWAIN, SUSAN L</td>
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<tr>
<td>Admin-Core-001 (434)</td>
<td>Admin Core</td>
<td>SWAIN, SUSAN L</td>
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<td>Core-001 (306)</td>
<td>In situ visualization of memory T cell interactions and function</td>
<td>McKinstry, Karl Kai</td>
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<td>Project-001 (711)</td>
<td>Generation of Functional CD4 Memory Subsets</td>
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<tr>
<td>Project-002 (875)</td>
<td>Molecular mechanisms regulating memory T cell development</td>
<td>Berg, Leslie J</td>
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<td>Project-003 (532)</td>
<td>Regulation of Effector and Memory T Cell Generation and Responses</td>
<td>Bradley, Linda Mac Pherson</td>
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<tr>
<td>Project-004 (760)</td>
<td>Does transition to memory define the response to bacterial challenge in the lung?</td>
<td>COOPER, ANDREA M</td>
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## Project/Performance
### Site Location(s) Summary

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## Components

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### Composite Application Budget Summary

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<td>Other Direct Costs (excluding Consortium)</td>
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<td>Consortium Costs</td>
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<td>Indirect Costs</td>
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<td>Total Direct and Indirect Costs</td>
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Contact PD/PI: SWAIN, SUSAN, L
eRA Commons Registration/Change Form

for access to: https://commons.era.nih.gov/commons/

This information is required to create an NIH eRA Commons account. Required fields are indicated with an *. To submit the form to Research Funding, click the button at the bottom of the form.

First Name*:  
Middle Name:  
Last Name*:  
Department*:  
UMMS Address*:  
UMMS Email*:  
UMMS Phone*:  

User Role*†: (choose all that apply)  
Scientific  
○ PI  
○ PostDoc  
○ Graduate Student  
○ Fellow Sponsor  
○ Scientist  
○ Undergraduate Student  
Administrative  
○ Assistant  

Username**:  

* Your username must be between 6 and 20 characters and is not case sensitive.
* If you choose the PI role, your eRA Commons username will follow you throughout your career, regardless of a future change in institutional affiliation. Please devise carefully and accordingly.
† In order to submit a fellowship application (F30/F31 Predoctoral or F32 Postdoctoral) to the NIH, you must be assigned the PI role in the Commons, in addition to the role of Graduate Student or PostDoc.

When complete, please save the form and send by e-mail attachment to research.funding@umassmed.edu. Alternatively, you may bring/send the completed form to RFS in S1-859. Call 508-856-2119 with any questions.

Rev. 9/11/2013
**FOREIGN PROJECT REGISTRATION FORM**

Anyone initiating, renewing or participating in a foreign project under University of Massachusetts Medical School auspices must complete this registration form. Depending on the nature of the project, further consultation may be required. The foreign project registration form must be completed at least 30 days before the project start date.

**PROCEDURE**

1. Fill out the information for all sections of the form, check all boxes that apply and select yes or no on all drop down boxes.
2. For projects with human subject or animal research the following is required: 1) IRB Docket # and/or IACUC, 2) IRB and/or IACUC approval letter as an attachment. *The PI name on the IRB/IACUC must be the same as the name of the PI of this Foreign Project, otherwise please provide a letter of explanation.*
3. If the project involves export or data controls please provide the [ECC form](#). If the project involves import of supplies, reagents or samples, please provide the signed [MTA form](#).
4. Obtain departmental agreement for the project.
5. Create a combined PDF of the Foreign project registration form and all supporting documents such as: IRB/IACUC approval letter, ECC, MTA, Scope of Work, Subcontract agreement, etc. Email the form to [jessica.chang@umassmed.edu](mailto:jessica.chang@umassmed.edu). An approval letter will be provided to the PI, department administrator and grant administrator.

**DEPARTMENTAL AGREEMENT** - Required approval before submission to OGH

<table>
<thead>
<tr>
<th>Department/Center/Program Chair Name</th>
<th>Signature</th>
<th>Review Date</th>
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<th>Division Chief</th>
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**Project Title:**

**Project Start Date:**

## GENERAL INFORMATION

**PRINCIPAL INVESTIGATOR**

<table>
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<tr>
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<th>Name:</th>
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<tr>
<td>Work Phone:</td>
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<td>Work Phone:</td>
</tr>
</tbody>
</table>

**DEPARTMENT/PROJECT ADMINISTRATOR**

**GRANT ADMINISTRATOR**

**Primary Contact:**

**Other Contact:**

<table>
<thead>
<tr>
<th>Email:</th>
<th>Work Phone:</th>
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**FOREIGN PARTNER**

<table>
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<tr>
<th>Institution/Organization:</th>
<th>Contact Person:</th>
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<tr>
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</tr>
<tr>
<td>Work Phone:</td>
<td>Work Phone:</td>
</tr>
</tbody>
</table>

**City:**

**Country:**

## LEGAL/INFRASTRUCTURE

- **Does the project fall under an existing Memoranda of Understanding?**
  - If yes, please send electronic copy to [jessica.chang@umassmed.edu](mailto:jessica.chang@umassmed.edu).
  - Responsible Parties:
  - Effective Dates: 
    - to

- **Will financial agreements be signed?**
  - If yes, please send electronic copy to [jessica.chang@umassmed.edu](mailto:jessica.chang@umassmed.edu).
  - Responsible Parties:
  - Effective Dates: 
    - to

- **Have documents describing the scope of work been created?**
  - If yes, please send electronic copy to [jessica.chang@umassmed.edu](mailto:jessica.chang@umassmed.edu).
  - Responsible Parties:
  - Effective Dates: 
    - to
Nature of the project (Please select yes or no for all options)

- [ ] Educational
- [ ] Patient Care
- [ ] Research
- [ ] Other, specify:

- [ ] If research, will the project involve clinical research and/or human subjects? Yes, please provide IRB Docket # ___ and attach IRB approval letter.
- [ ] If research, will the project involve animal research? Yes, please provide IACUC Docket # ___ and attach IACUC approval letter.

The name on the IRB/IACUC must be the same as the name of the PI of this Foreign Project, otherwise please provide a letter of explanation.

FOREIGN PROJECT COMPONENT (Please check all that apply - NIH definition of a foreign project)

- [ ] Performance of any significant scientific element or segment of a project outside the United States, either by the grantee or by a researcher employed by the grantee.
- [ ] Human subject or animal research in a foreign country
- [ ] Extensive foreign travel by grantee project staff for the purpose of data collection, surveying, sampling, and similar activities.
- [ ] Foreign Collaborator
- [ ] US funding going to a foreign organization or external funding from a foreign sponsor.
- [ ] Any activity that may be subject to export control (Export Control Decision Tree)
- [ ] Any activity of the grantee having an impact on US foreign policy through involvement in the affairs or environment of a foreign country (e.g., USAID).

Personnel Involved (Please select yes or no for all options)

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<tr>
<th>Yes</th>
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<tbody>
<tr>
<td>☐ UMMS Faculty</td>
<td>☐ Foreign Faculty</td>
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<tr>
<td>☐ UMMS Staff</td>
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</tr>
<tr>
<td>☐ UMMS Post-Doctoral fellows</td>
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<tr>
<td>☐ UMMS Residents</td>
<td>☐ Foreign Residents</td>
</tr>
<tr>
<td>☐ UMMS Students</td>
<td>☐ Foreign Students</td>
</tr>
</tbody>
</table>

Will the project require any of the following? (Please select yes or no for all options)

- [ ] Travel to a foreign location? Yes, what countries? If yes, do UMMS personnel require Visas for working in the foreign location?
- [ ] Member(s) of the partner institution travel to UMMS? If yes, do the travelers require Visas?
- [ ] Hiring non-UMass faculty/staff in the foreign location? Locating an office in the foreign location? Providing health insurance to in-country personnel?

EXPORT CONTROLS AND DATA CONTROLS (Please select yes or no for all options) If you answer yes to any of these questions, please provide the ECC form and/or signed MTA form.

- [ ] Does your project involve company or other proprietary data or technical information? If yes, please describe:
- [ ] Are you aware of any personnel restrictions or restrictions on publication that apply to your project? If yes, please describe:
- [ ] Is there any use of select agents, toxins, viruses or bacteria including shipment of such items to foreign locations? If yes, please describe:
- [ ] Does it involve physical export (hand carried or shipment) abroad or import of any materials or equipment? If yes, please describe:
- [ ] Will the project involve human subjects, personal data, or personally identifiable information? If yes, please describe:

FINANCIAL INFORMATION (Check all that apply)

- [ ] Grant
- [ ] International
- [ ] WHO
- [ ] Other (Specify)
- [ ] State (Specify)
- [ ] Federal
- [ ] CDC
- [ ] NIH
- [ ] Other (Specify)
- [ ] Foundation (Specify)
- [ ] Institutional Funds (Specify)

Will the budget require any of the following? (Check all that apply)

- [ ] Sub-awards
- [ ] Vehicle Purchase
- [ ] In-Country Banking Account (if checked, please fill in the additional information below)
- [ ] Service Contracts
- [ ] Field Advances
- [ ] Purchase or Rental of Real Estate

What will funds be used for? Total Estimated Funds: _ _ Funding Duration: _ _ to _ _