



Form 1304 FR.01 – Instructions

Pre-Award Costs and At-Risk Account Request Form

Revised 3/10/2021

General Guidance: For additional information on the use and management of at-risk accounts, please refer to [Pre-award Costs and At-Risk Account Requests](#).

FIELD	INSTRUCTIONS
Header	
IRES Record #	Enter the corresponding IRES record number.
Cost Center	Enter the Cost Center under which the award will be set up.
Award Name	Enter the award name (title) that will be entered into Workday.
Section I – Demographic Information	
Principal Investigator/Project Director's Name	Enter the full name ("John Q. Smith") of the PI/PPD of the project.
Department Name	Enter the name of the department of the PI/PPD's home department or the department that has responsibility for the administration of this proposal and any subsequent funding.
Business Office Contact	Enter the name of the contact in the business office/cost center that will be responsible for administering the account (usually the PI's business cost center).
Phone	Enter office phone number of the contact in the business office/cost center that will be responsible for administering the account (usually the PI's business cost center).
Section II – Project and Sponsor Information	
Project Title	Enter the full title of the project/proposal.
Sponsor Name	Enter the name of sponsor.
Sponsor Award Number (if known)	If known, enter the expected award number to be issued by the sponsor for this funding.
Originating Sponsor, if Yale is a Subrecipient	If the anticipated funding to Yale will be in the form of a subaward, indicate the name of the prime source of funding e.g., NIH, NSF, etc.
Section III – Compliance Requirements	
Does the research involve human subjects?	Indicate Yes or No as to whether or not the project will involve human subjects. If 'Yes', indicate the protocol number(s) and congruency date(s). If this information is not included it will be sent back to the department to complete.
Does the research involve animal subjects?	Indicate "Yes" or "No" as to whether or not the project will involve animal subjects. If 'Yes' indicate the protocol number(s) and congruency date(s). If this information is not included it will be sent back to the department to complete.
If there is more than one IACUC and/or IRB protocol associated with this research, please identify them on an additional sheet listing each and the congruency dates for each.	
NOTE: If a protocol(s) is pending approval at the time of submitting this form, this form must be accompanied by an Attestation letter signed by the Principal Investigator. Examples of letters are located here .	
Section IV – Award Information	
Type of Request	Indicate which of the following apply: Pre-Award Costs and account set-up: This option should be selected when the PI wants to initiate the project 90 days prior to the start date of the award. For Pre-Award costs, OSP prior approval is required for federal sponsors; Sponsor approval is required for non-federal sponsors. Pre-award costs approval only: Award is in-house and already set-up. This request should be extremely rare. For Pre-Award costs, OSP prior approval is required for federal sponsors; Sponsor approval is required for non-federal sponsors. In those rare situations when after the fact (i.e., an award was received, an account set-up, and the start date has passed), and later recognized that pre-award costs should have been requested but were not, the PI must complete Form 1304 FR.01 and receive OSP approval prior to executing any cost transfers. No pre-award costs: Award is late and/or negotiations ongoing
At-Risk and/or Pre-award Request Justification	Provide a justification as to why an 'At-Risk' account is needed for this project; The justification should include documentation that funding is imminent. If requesting pre-award costs, provide justification as to why pre-award is necessary for the efficient and timely performance of the project.
Anticipated Award will be:	Indicate, by marking with an "X", whether the anticipated award will be a: "New", "Competitive Renewal" or "Non-competing Continuation" funding (to an existing award).
Anticipated Award/Subaward Start Date	Enter the anticipated date sponsor is expecting to make funding available.
Anticipated Award/Subaward End Date	Enter the expected end date of project (including all years of anticipated support).
If Pre-award costs, enter the anticipated Pre-award Start Date	If requesting pre-award costs, enter the date you wish to begin pre-award spending. (NOTE: Most Federal awards allow for pre-award costs 90 days prior to the anticipated start date of the award. Other sponsors may permit pre-award costs. Please direct all questions to the appropriate OSP Award or Contract Manager.
Initial Request or Extension Request	Indicate if this is the initial request or an extension request

Charging Instructions (COA)	Enter the COA Worktags (Yale Grant #, Award #, Assignee, Cost Center) of the Yale account that will be revised if an account already exists (i.e., open year two of an existing award when the award notice is late) or indicate "New" if new PTAO will be needed.
F&A Rate	Indicate the F&A rate that is being used to calculate the F&A costs.
F&A Rate Base	Indicate the F&A rate base upon which the F&A costs are being calculated.
If Salary-over-the-Cap/Cost Sharing, please indicate type	If the anticipated award includes Salary-over-the-cap/Cost-Sharing, choose from the appropriate type from drop down list.
Award	If Cost-Sharing/Salary-over-the Cap applies, enter the Yale award (account, "AWDxxxxx" and grant "GRxxxxx") number supporting the cost sharing/salary-over-the-cap charges.
Cost Center	Enter the Yale Cost Center for where the cost sharing/salary-over-the-cap will be charged.
Section V – Statement of Responsibility for Requesting an Account	
Source of Departmental Funds (Charging Instructions)	Enter the COA to be charged, if award is not received.
Approval Signatures	Required signatures include the Principal Investigator, Administrator/Business Manager and the Department Chair.