

Checklist for PI Transfer TO Duke

NEW (RECEIVING) PROJECT INFORMATION

Principal Investigator:	_____		
Unique ID:	_____		
Highest Degree:	_____	Department Contact:	_____
Funding Agency:	_____	Contact Phone:	_____
Grant # (Agency ID):	_____	Contact E-mail:	_____
eRA Commons Username:	_____		
Academic Appointment Start Date:	_____		

Please provide department verification of the appointment start date.

ORIGINAL (RELINQUISHING) INSTITUTION INFORMATION

Original Institution:	_____	Administrative Contact:	_____
Original Department:	_____	Contact Phone:	_____
Original Position Title:	_____	Contact E-mail:	_____

Date grant will be relinquished from Original (Relinquishing) Institution: _____

ORIGINAL (RELINQUISHING) INSTITUTION DOCUMENTATION

1. Copy of initial proposal and award statement	<input type="checkbox"/>
2. Copy of latest progress report	<input type="checkbox"/>
3. Copy of Relinquishment letter or signed agency relinquishment form	<input type="checkbox"/>
4. If original award had a cost-share agreement, provide in the comments below how that cost-share will be fulfilled at Duke.	<input type="checkbox"/>

PROTOCOL INFORMATION

Are Human Subjects Involved? Yes No

If yes, please contact the IRB office to begin concordance approval of the scope of work with the human subject protocol.

Collect CITI human subject certifications for all personnel involved with human subjects.

Are Vertebrate Animals Involved? Yes No

If yes, please contact the IACUC office to begin concordance approval of the scope of work with the animal protocol.

Will biohazardous materials/recombinant DNA be involved? Yes No

If yes, please contact the IBC office for assistance with transfer of material.

Comments: _____

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SUBCONTRACT/SUBRECIPIENT/CONSORTIUM INFORMATION

Does this project involve subcontract (s)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, has the PI notified the subcontractor (s) of the transfer?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Complete Subrecipient Form Page 1 for each subcontractor (s) after SPS creation	<input type="checkbox"/>			
Subcontract site (s):	_____	Contact (s):	_____	
	_____		_____	
	_____		_____	

DUKE KEY PERSONNEL INFORMATION

1. Collect biographical sketches for all Duke Key personnel.	<input type="checkbox"/>
2. Collect SPOC approved Other Support documents for all Duke Key personnel.	<input type="checkbox"/>

MATERIAL TRANSFER INFORMATION

Will any material be provided from the original (relinquishing) institution? (e.g. samples, genetically modified mice) This includes any personal inventory of the PI as it will need to be accounted for in the transfer process. If yes, please complete an INCOMING Material Transfer Agreement Submission form to initiate the transfer process.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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EQUIPMENT INFORMATION

Will equipment be transferred to Duke for this grant?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please contact Plant Accounting for appropriate equipment record retention.				

BUDGET INFORMATION

1. Complete detailed budget for the funds to be transferred utilizing appropriate Duke Fringe Benefit rates and F&A (indirect cost) rates.	<input type="checkbox"/>
2. Request Pre-Award spending fund code with backstop via cost object request form.	<input type="checkbox"/>

PROPOSAL INFORMATION

1. Submit new proposal via Sponsored Projects System (SPS).	<input type="checkbox"/>
2. Include in Internal Documentation signed Duke Proposal Approval Form (DPAF).	<input type="checkbox"/>
3. If transferring grant to Duke changes the scope of work, provide new scope of work and timeline.	<input type="checkbox"/>
4. Complete new facilities and equipment describing Duke resources.	<input type="checkbox"/>
5. Completion of Conflict of Interest Statement.	<input type="checkbox"/>
6. Completion of Research Cost Compliance training for Duke Faculty.	<input type="checkbox"/>
7. Additional materials as specified by agency guidelines.	<input type="checkbox"/>

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FORM REQUIREMENTS SECTION

NIH FORMS

NEW (RECEIVING) INSTITUTION

A. For NIH Grant awards (EXCEPT Fellowship F Mechanism –SKIP TO SECTION B)

For instructions refer to link: <http://grants.nih.gov/grants/funding/phs398/phs398.html>

1. Application face page (PHS Form 398)	
i. “CHANGE OF GRANTEE INFORMATION” typed in capital letters across the top of the page http://grants1.nih.gov/grants/funding/phs398/fp1.pdf	<input type="checkbox"/>
2. Sponsor Statement (For K mechanism transfers)	<input type="checkbox"/>
3. Progress Report http://grants.nih.gov/grants/funding/2590/2590.htm	<input type="checkbox"/>
i. Anniversary date transfer (cycle start date): provide a progress report for the current year, including a statement regarding the goals of the upcoming year	
ii. Mid-year transfer: provide an updated progress report including a statement regarding the goals of the remaining period of committed support	
4. Resources Format page (PHS Form 398)	<input type="checkbox"/>
5. Budget pages PHS Form 398) -current/future years	<input type="checkbox"/>
i. Modular grants: provide narrative budget justification, including total direct costs and F&A costs for the current budget period http://grants.nih.gov/grants/funding/phs398/modbudget.pdf	
ii. If the grant currently includes salary support for PI or any other transferring member of the project and continued salary support is not required at the new institution, a statement regarding the proposed rebudgeting of these funds is required.	
6. Provide explanation if the unobligated balance and/or relinquished amount (including prior-year carryover) is greater than 25 percent of the current year’s total budget.	<input type="checkbox"/>
7. Statement concerning current research plan and an	<input type="checkbox"/>

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indication of whether the original plan has changed.

8. Updated PHS 398 biographical sketches for key personnel	<input type="checkbox"/>
9. Updated Other Support for key personnel	<input type="checkbox"/>
10. PHS 398 Checklist Page	<input type="checkbox"/>
i. Modular grants: information regarding the number of modules and the basis for computing F&A costs should be provided for future years on the checklist page.	
ii. Check the box for Change of Sponsoring Institution under Type of Application and include the name of the former institution on the same line.	
11. Approved concordant IRB/IACUC/IBC, if applicable	<input type="checkbox"/>
12. Certification of Human Subjects Training (CITI), if IRB applicable, for all personnel involved in the design and conduct of human subject research.	<input type="checkbox"/>
13. A list of equipment (which was purchased in whole or in part with grant funds and has an acquisition cost of \$5,000 or more) to be transferred from the original grantee institution. Such a listing in the application represents acceptance of title to the transferred equipment.	<input type="checkbox"/>

B. For NIH Fellowship (F mechanism) awards, utilize PHS 416-1 forms

<http://grants.nih.gov/grants/funding/416/phs416.htm>

1. Form Page 1: Face Page	<input type="checkbox"/>
2. Form Page 2: Sponsor/Co-Sponsor Information	<input type="checkbox"/>
i. If Sponsor/Co-Sponsor remains current as initially proposed, provide new contact information.	
ii. If Sponsor/Co-Sponsor changes, refer to Section 5.8 of the PHS 416-1 instructions.	
http://grants.nih.gov/grants/funding/416/phs416-1.pdf	
3. Form Page 3: Goals, Activities Planned, Training Site (s), Human Embryonic Stem Cells	<input type="checkbox"/>
i. Items 18 and 19 are not required unless there are changes from original submission.	
ii. Item 20 will require the new information	

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	<p style="text-align: center;">for the Project/Performance (Training) Site.</p> <p>iii. Item 21 will require completion of Human Embryonic Stem Cells, if applicable.</p>	
4.	Form Page 4: Table of Contents	<input type="checkbox"/>
5.	Research Training Plan: Include the research training plan from the original application to provide the new sponsoring institution a record of what was peer reviewed and approved.	<input type="checkbox"/>
6.	Training Plan, Environment, Research Facilities Section 5.8.3 of the PHS 416-1 Instructions: http://grants.nih.gov/grants/funding/416/phs416-1.pdf	<input type="checkbox"/>
7.	PHS Checklist Page	<input type="checkbox"/>
	<p>i. Check the box for Change of Sponsoring Institution under Type of Application and include the name of the former institution on the same line.</p>	
8.	Progress Report	<input type="checkbox"/>
	<p>i. Anniversary Date Transfer – Also include Form Page 2 and 3 from (PHS 416-9) of the Project Report for Continuation Support of Kirschstein-NRSA Individual Fellowships and a completed Targeted/Planned Enrollment Table Format Page or Inclusion Enrollment Report Format Page, if applicable.</p> <p>http://grants.nih.gov/grants/funding/416-9/phs416-9.htm</p>	
9.	Approved concordant IRB/IACUC, if applicable	<input type="checkbox"/>
10.	Certification of Human Subjects Training (CITI), if IRB applicable, for all personnel involved in the design and conduct of human subject research	<input type="checkbox"/>

SIGNATURES DESIGNATING APPROVAL OF PROJECT TRANSFER:	
PI: _____	Date _____
Business Manager*: _____	Date _____

 Project's
 Owning Org*

Submit all materials to your assigned ORA Specialist