

Statement of Intent to Establish a Consortium Agreement

Weill Cornell Medici	ine (WCM) Contact Inforr	nation:	_		
WCM is:	Prime Recipient (F	PTE)	☐ Subrecipient		
WCM PI:					
1300 York Avenue, B New York, NY 10065	-4805 cmc@med.cornell.edu	nell University	Congressional Dis	strict: NY-012	
Consortium Instituti	on Contact Information:				
Consortium site is:				☐ Subrecipient	
Consortium PI:		,			
Consortium PI Dept:					
Institution Name:					
Institution Address:					
Central/admin email	1-				
DUNS:	EIN: _		Congressional D	oistrict:	
Organization type:					
Project Information	:				
Grant Sponsor:		_ Grant	Number:		
Initial/current Budge	et Period: From:	through	·		
Proposed Project Da	tes: From:	through			
Direct Cos	sts (Initial/Current Year):		Total Direct Costs:		
II	OC (Initial/Current Year):		Total IDC:		
	Total:		Total:		
Will this project requ	uire cost sharing from the	Subrecipient?	☐ Yes ☐ No		
Will this project invo	lve human subjects?	□Yes	□ No		
IRB Approval:	☐ Pending ☐ Ap	oproved	FWA Number:		
Will this project invo	lve animal subjects?	☐ Yes	No No		
IACUC Approval:	☐Pending ☐ Ap	oproved	Assurance Number:		
Will this project invo	lve human embryonic ste	m cells? \square Yes	s 🗆 No		
Will this project requ	uire approval by the Instit	utional Biosafety	Committee?	□No	
Potential for the dev	elopment of Intellectual I	Property is:	☐ Low ☐ Medium	□High	

Secilities & Administrative Rates (IDC) We have applied our federally negotiated F&A rate. Our negotiated rate is:	Suk	recipient Budget:				
We do not have a federally negotiated F&A rate, and have applied the 10% de minimis rate approved for institutions without a federally negotiated rate. We have applied other rates as indicated by the Grant Sponsor policies. Rate:	1)	Facilities & Administrative Rates (I	DC)			
institutions without a federally negotiated rate. We have applied other rates as indicated by the Grant Sponsor policies. Rate:		☐ We have applied our federally	negotiated F&A rate. O	ur negotiated rate is:%.		
2) Fringe Benefit Rates Fringe benefits are calculated in a manner consistent with or lower than our federally-negotiated rate(s). We do not have a federally negotiated rate and have applied actual fringe benefits. We have applied other rates, description follows: Subprecipient two funds under this agreement. Subrecipient follows: Subrecipient Key Personnel have no conflicts to disclose. Subrecipient Key Personnel have conflicts associated with this application and Subrecipient organization has a compliant policy in place. All potential conflicts will be reported to and managed by the Subrecipient TCOI office, who will report any necessary, reportable disclosures to the Prime Recipient at the time of award. Assurances: In signing below and offering to participate in this research program, the Subrecipient Institution certifies that the appropriate programmatic and administrative personnel employed by Subrecipient and involved in this application are aware of the pertinent regulations and policies of the granting agency, and will work with PTE to establish the necessary inter-institutional agreement(s) consistent with those policies. In addition, Subrecipient certifies that neither they nor their principals ar		•	-	nave applied the 10% de minimis rat	e approved for	
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