

Appendix I

ORSP/SFSU Cost Sharing Policy and Procedure

Sample Forms:

- **Notice of Cost Sharing/Matching Contribution**
- **Time & Effort Reporting Sheet**
- **In-Kind Contribution Reporting Sheet**

**San Francisco State University
Office of Research & Sponsored Programs**

NOTICE OF COST SHARING/MATCHING CONTRIBUTION

Date: _____

External
Funding Source: _____

A voluntary mandatory cost sharing/matching, contribution from University funds is required for the following grant proposal:

Proposal/Project Title: _____

Proposal/Grant/Project Account #: _____

Duration Period: From _____ To _____

Total Cost sharing/matching, cost contribution
(See attached ORSP budget for detailed
allocation of match/contribution) _____

Source of Cost sharing/matching (Acct No., if applicable) _____

Principal Investigator(s): _____

University policy requires a signed acknowledgement from the principal investigator to formalize recognition of the following responsibilities:

- Maintenance of records to support the cost sharing/matching funds contribution, including, but not limited to, copies of travel vouchers, paid invoices, and receipts for supplies issued. An explanation of the individual's appointment and assigned workload should suffice to support the time reported as having been contributed to the award.
- Forwarding such records to the Office of Research and Sponsored Programs, available for audit.
- Preparation of a cost sharing/matching funds contribution report as requested by the funding agency.

Guidelines for use of Notice of Cost Sharing/ Matching Contribution

This form is to be used when a cost sharing/matching is required as a condition for a grant or an award. This notification form will formalize recognition of the cost sharing/matching requirements.

Process:

- ORSP will fill out the form completely and will then forward to the Principal Investigator (P.I.) for signature.
- P.I. will obtain approval signatures from the Department/School or other Institutions who are committed to match or to cost-share the grant or award.
- P.I. will forward completed form to ORSP.
- P.I. will assist, if needed, in the preparation of a cost sharing/matching funds contribution reports as requested by the funding agency.
- Original copy will be included as a part of grant/award's budget.
- Copies to: Trust Accounting, Principal Investigator, Cost matching/sharing Department/School or Institution.

ACTION TO BE TAKEN

**Please sign and return this Notice of Cost Sharing/
Matching Contribution to:**

**Assistant Vice President
Office of Research and Sponsored Programs
HSS 204**

Principal Investigator's Name _____

Principal Investigator's Signature _____

Date _____ **Phone Ext** _____

Cost Sharing Categories	\$ Amount	Source (Acct #)	Department/ School	Approval Signature
TOTAL				

ORSP-PREPRO-F1

**SAN FRANCISCO STATE UNIVERSITY
OFFICE OF RESEARCH AND SPONSORED PROGRAMS**

TIME AND EFFORT REPORTING SHEET

Name: _____
 Position/Title: _____
 SSN No: _____
 Dept./College: _____

Project Acct. No: _____
 Project Title: _____
 Project Director: _____
 Cost Sharing Acct. No. _____

Period Covered: _____

	% Time	Salary Rate	Benefits	Total Cost Contribution
<u>Non-Academic</u>				
Staff: Salaried	_____	_____	_____	_____
Hourly	_____	_____	_____	_____
<u>Academic</u>				
Lecturers/Profs.:				
A. Y.				
Fall	_____	_____	_____	_____
Spring	_____	_____	_____	_____
Summer	_____	_____	_____	_____
C.Y.	_____	_____	_____	_____
(Pls. Attach documentation of appointment, if any)				

Brief Description of Activities and/or Duties:

Verification/Certification:
 I certify that to the best of my knowledge, the above effort stated reasonably reflects the contributed time effort of the above employee for the above project.

EMPLOYEE:
 Print Name: _____
 Signature: _____
 Date: _____

PROJECT DIRECTOR:
 Print Name: _____
 Signature: _____
 Date: _____

DEPT. CHAIR OR COLLEGE DEAN
 Print Name: _____
 Signature: _____
 Date: _____

OFFICE OF RESEARCH AND SPONSORED PROGRAMS
 Received/Processed by: _____
 Signature: _____
 Date: _____

/rob
 cc: Dept./College
 ORSP FILE

**SAN FRANCISCO STATE UNIVERSITY
OFFICE OF RESEARCH AND SPONSORED PROGRAM**

IN-KIND CONTRIBUTION REPORTING SHEET

Project Acct. No: _____

Project Title: _____

Project Director: _____

Dept./College/Other Institutions: _____

Cost Sharing Acct. No.: _____

Period Covered: _____

Categories:	Actual (\$) Value
1. Student Assistants	\$ _____
2. Supplies & Services	\$ _____
3. Travel	\$ _____
4. Contractual Services/Independent Contractors	\$ _____
5. Other (Briefly describe): _____ _____ _____	\$ _____
6. Subtotal, Direct Costs (Sum items 1-5)	\$ _____
7. Unrecovered Indirect Cost (Other Institution only)	\$ _____
8. Total	\$ _____

Project Investigator/Coordinator Signature Date

Authorized Signature, San Francisco State University Date

Note: Attach documents to support the cost matching/sharing funds contribution, including, but not limited to copies of travel vouchers, paid invoices, receipts for supplies issued and billing statements for any other services rendered.

Appendix II

ORSP/SFSU Guidelines and Forms

- **OMB Circular A-133 Audit Compliance Letter**
- **Time and Effort Certification Form**
- **Work Order Number form**

Date:

To: (Addressee)

Subject: **OMB Circular A-133 Audit Compliance**

Your organization was awarded federal funds as a subrecipient of San Francisco State University (SFSU) during the University's fiscal year ending _____. The U.S. Office of Management and Budget (OMB) Circular A-133 " Audit of Institutions of Higher Education and Other Nonprofit Organizations, " requires San Francisco State University to ensure that a subrecipient of federal awards of **\$300,000** or more comply with audit requirements of OMB Circular A-133. Our records indicate SFSU passed-through federal funds to your organization that we received from _____ , for the program entitled _____.

Please complete the following and return your response to me by: _____.

- We have completed our A-133 audit for the most recent period _____ to _____. The audit disclosed no material instances of noncompliance with federal laws or regulations or reportable conditions specifically related to the award (s) from San Francisco State University. NO EXCEPTIONS WERE NOTED.
- We have completed our A-133 audit for the most recent period _____ to _____. The audit report noted material noncompliance issues and/or reportable conditions. Enclosed is a copy of the audit report package and the corrective action plan.
- We have not yet completed our A-133 audit for the period _____ to _____. We expect the audit to be completed on _____. Within thirty (30) days of completion, we will send you either written notification or a copy of the audit report package.
- We are not subject to the audit requirements of A-133 because we:
 - Received less than \$300,000 in direct & indirect federal funds per year.
 - Are a Foreign (Non-US) Entity.
 - Are for a Profit Organization
 - Other (Explain) _____

I certify that the above checked boxes accurately represent the organization of which I am a representative. Further, I certify that all relevant material findings contained in the audit report, if completed, have been disclosed.

Signature : _____ Date _____

Printed Name _____ Title: _____

We appreciate your assistance in complying with this Federal mandate and your prompt response to this request .

Sincerely,

ORSP or Fiscal Affairs, SFSU

SAN FRANCISCO STATE UNIVERSITY
Office of Research and Sponsored Programs
TIME & EFFORT CERTIFICATION
REIMBURSED RELEASE TIME CALENDAR YEAR

Faculty Information	Project Information
Faculty Name: Social Security No: College: Dept.:	Project Director: Project #: Project Title: Agreement #:

RRT Calculation is at: **Replacement Rate** **OR** **Current Salary**

Time Period	Base Salary	X	% Time	X	Number of Months	=	Total RRT Salary Cost	+	Benefit Cost @ .179	=	Total Salary + Benefits
		x		x		=		+		=	

CONFIRMATION

Please check one:

The work has been performed and the time base indicated above reasonably reflects the percentage of effort involved.

There has been significant changes in work and activity and the salaries and wages charged to this sponsored project should be modified as indicated below.

1. The time base is incorrect and should be _____%
2. The time period is incorrect and should be: _____ to _____
3. The project information is incorrect.

The Project Numbers should be: _____

The Project Title should be: _____

The Funding Agency is: _____

SIGNATURES

Employee Signature: _____

Date: _____

PI Signature: _____

Date: _____

Chair/Dean Signature*: _____

Date: _____

*If the employee is also the PI, then this form must be signed by the Department Chair. If the PI is the Department Chair, then this form must be signed by the College Dean.

**SAN FRANCISCO STATE UNIVERSITY
OFFICE OF RESEARCH AND SPONSORED PROGRAMS**

WORK ORDER NUMBER #

Date: _____

PI/PD: _____

Project Title: _____

Granting Agency _____

Grant Award Number: _____

Period of Performance: _____

This Work Order authorizes San Francisco State University Foundation to administer the project named above, as awarded in the attached grant award notice. The total budget to be administered by the Foundation is \$ _____ as detailed in the awarded budget categories attached.

The payment to the Foundation for this service is \$ _____ (5% of _____).
This administrative cost will be charged to Acct. # _____ -5520.

All other terms and conditions are contained in the master MEMORANDUM OF UNDERSTANDING between San Francisco State University and San Francisco State University Foundation, Inc.

Project Director/PI	Approval Signature	Date
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Grant Administrator, ORSP	Approval Signature	Date
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Stephen C. Smith, Director, Procurement Office	Date
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Karen V. Clopton, Chief of Operations, SFSUFI	Date
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/rob

cc: Project PI/PD
H. Malouf, Trust Accounting
A. Essex, SFSUFI
ORSP File (Acct. # _____)

Appendix III

Relevant SFSU Web Sites

- **SFSU Policies & Procedures Guide (campus policies and procedures listed by administrative and academic areas and alphabetically by subject)**
www.sfsu.edu/~ppg
- **Fiscal Affairs Home Page**
<http://fiscaff.sfsu.edu>
- **FRS Guide**
<http://frsweb.sfsu.edu:85/csu/sfProd.htm>
- **Manuals and Forms Repository**
<http://fiscaff.sfsu.edu/Reference/Public/RefLib.htm/ABC.htm>
- **Procurement Policies and Procedures**
<http://fiscaff.sfsu.edu/Procurement>
www.calstate.edu/csp/crl/policy/Policy.shtml
- **Travel Policies and Procedures**
<http://fiscaff.sfsu.edu/AcctsPayable/Travel>
- **Human Resources' Home Page**
www.sfsu.edu/~hrwww
- **ORSP Home Page**
www.sfsu.edu/~orspwww
- **ORSP/SFSU Conflict of Interest Forms and Guidelines**
<http://www.sfsu.edu/~orspwww/conflict/conflict.html>