



Date:

TO: **FVSU Office of Sponsored Programs**
(478) 825-4323

FROM: (Name)

(Department)

(Telephone Number)

For each subawardee, **attach** a copy of 1.) subawardee's detailed scope of work as written and approved in the proposal, and 2.) subawardee's budget and budget justification.

Name of sponsoring/funding agency:

Award number:

FVSU Grant Acct. number:

Name of Subawarded Institution:

Subaward amount:

Performance period:

Responsible persons at **Subawarded Institution's Office of Sponsored Programs**:

For administrative matters:

Name:
Position:
Phone #:
Email:

For technical matters (PI/PD):

Name:
Position:
Phone #:
Email:

Signature of FVSU principal investigator:

Date: _____