GRANT COMPLETION CHECKLIST

Funding Agency: ______________________________________________________
Project Title: __________________________________________________________
Project ID (ex. 20XESJC09RSMITH): ______________________________________

The Project Director has responsibility to:
(Please place a check mark by each completed objective and include additional information where indicated. Sign, date and submit to the Office of Research and Sponsored Programs.)

___ Verify that project objectives based on the original/amended proposal were met

___ Review expenditures on the grant account to ensure final zero balance

 or

___ Notify School Budget Officer where to move residual funds
    Chart String ___________________ Amount ________________

___ Cover any overdrafts or disallowed expenses from other accounts

___ Substantiate cost share/matching expenditures and maintain hard-copy records
    List PeopleSoft Chart String for matching funds or check option for “no matching/cost sharing amounts:
    Chart String ___________________ Amount ________________
    Chart String ___________________ Amount ________________
    ________ No matching or cost sharing amounts

___ Contact co-investigators or sub-awardees for reports

___ Notify grant employees of termination or arrange for other source of payment

___ Complete inventory of equipment and plan for disbursement of remaining equipment and supplies

___ Verify that the project files are complete and records are transferred to appropriate personnel for future retrieval

___ Prepare and submit reports on time, within agency requirements, providing copies to RSP
    ___ interim
    ___ annual
    ___ final programmatic reports

___ Provide detail as necessary to RSP for final invoicing and to General Accounting for fiscal reports

___ Maintain records for undergraduate, graduate, and post-doc student research training. Responsible conduct training is required for any student working on the project regardless of compensation.
    Records are filed in the following office: _____________________________

___ Submit final checklist to RSP to close the award

____________________________________  _________________________
Project Director’s Signature    Date Submitted

RSP:01/15/2010