



## Post Award Check List

College \_\_\_\_\_ Principal Investigator \_\_\_\_\_

Award Title \_\_\_\_\_

Award# \_\_\_\_\_ Fund# \_\_\_\_\_ Streamlyne# \_\_\_\_\_

Amount Awarded \$ \_\_\_\_\_ Project Begin Date \_\_\_\_\_ Project End Date \_\_\_\_\_

What is the annual budget? \_\_\_\_\_ Is the award a multi-year award? \_\_\_\_\_

Will you be pursuing a course release correspondent to this grant? \_\_\_\_\_

If so, for which semesters? \_\_\_\_\_

Project Kick off Date: \_\_\_\_\_

(Project Kickoff to be scheduled by ORSP Post Award Team and include participants with a designated role)

### Notes:

\*While the Sponsored Programs team thoroughly reviews all award documents prior to accepting an award, PIs are encouraged to review documents as well in preparation for the kick-off meeting to ensure all questions or concerns are addressed. Details may include but are not limited to interim and final reporting requirements, scheduled deliverables, and approvals.

\*Jeff Martin with the controller's office will manage all invoicing.  
Jeff's contact information: jeffrey.martin@unco.edu 970-351-1830

\*UNC does not utilize bridge funding. No grant spending is permissible until the grant and grant fund are fully set up. Not all sponsors allow spending prior to full acceptance of the award. *Any spending that occurs prior to setting up the accounts to manage the award will be the responsibility of the PI and their unit unless otherwise approved by the Assoc. VP for Research.*

\*Grants typically do not allow for raises over 3%. If any involved party receives a raise greater than 3%, this may not be applicable to salary paid through the grant. Any salary adjustments not included at the time of submission must be approved by the sponsor and may require redistribution of funds from other portions of the award.

\*The PI is strongly encouraged to maintain their own records of grant expenditures throughout the lifetime of the grant.

### Project Participants and Designated Role:

1. Name \_\_\_\_\_ Responsibility \_\_\_\_\_

2. Name \_\_\_\_\_ Responsibility \_\_\_\_\_

3. Name \_\_\_\_\_ Responsibility \_\_\_\_\_

4. Name \_\_\_\_\_ Responsibility \_\_\_\_\_

**Grant Implementation and Management**

	Task and Completion/Delivery Date
Interim and Final Reporting Requirements	1. 2. 3. 4. 5. 6.
Scheduled Deliverables	1. 2. 3. 4. 5. 6.
Approval Requirements	1. 2.
Other	1. 2. 3. 4.

Principal Investigator \_\_\_\_\_ Date \_\_\_\_\_  
 (Signature)

Post Award Rep \_\_\_\_\_ Date \_\_\_\_\_  
 (Signature)

A copy of a completed and signed check list should be sent to [orsp.post-award@unco.edu](mailto:orsp.post-award@unco.edu).