RISK PROJECT REQUEST / APPROVAL FORM

TO: Grants and Contracts Administration

SUBJECT: Request for Risk Project Number or Increase

Please establish a Risk Project Number / Increase according to the following:

Proposal Processing Number:	
Requested Start Date of Risk Account:	
Spending Authority Requested:	$
Default Account Number for College:	
Project Number Assigned by GCA:	
Extension Risk (for Modification/Amendment):	☐ Check here if requesting risk for Mod/Amend

The signatories below acknowledge and agree that:

1. A proposal has been received, evaluated, and signed off on by the Office of Sponsored Programs.
2. Federal guidelines or sponsor policies allow the University to incur costs prior to receipt of an official award.
3. Clemson University has received some form of written communication from the sponsor that the proposal will be awarded.
4. If this is an industry-sponsored proposal, there is written approval from the sponsor authorizing expenditures prior to contract execution.
5. It is understood that charges incurred prior to the sponsor's official start date are subject to disallowance unless provided by sponsor policy, or otherwise approved by the sponsor.
6. Charges incurred on a risk project will not be considered a bad debt if an award is not executed. The default account number identified above will absorb all costs incurred should funding not be awarded for the support of this project.
7. All required Human Subject, Animal Subject, Biohazard/Chemical, and / or Recombinant DNA compliance protocols, and export controls have been approved and Conflict of Interest has been disclosed prior to initiation of this request.
8. The risk project number will be valid for 90 days only and up to $50,000.
9. For initial requests, the following documents must be included as a **combined package**. For Modifications and Amendments, a completed and signed copy of this form is all that is necessary.
    a. ☐ InfoEd Snapshot
    b. ☐ Internal Budget for requested amount (must include PI Employee ID# and Department #)
    c. ☐ Sponsor communication documenting intent to issue an award

APPROVALS:

Principal Investigator:	
Department Chair:	
Associate Dean for Research:	
Vice President for Research (Industry Only):	
OSP / OIC Approval:	