

Florida A&M University  
Division of Research  
Office of Sponsored Programs

**Request to Direct Charge Costs Normally Treated as Indirect Costs**

FAMU/PeopleSoft Project ID: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsoring Agency: \_\_\_\_\_

NOTE: *(Approval is REQUIRED to direct charge administrative and clerical salaries and other administrative-type expenses. In addition to meeting the definition of exceptional circumstances, costs must be specifically identifiable to a particular sponsored project, be reasonable, allowable and allocable.) (§ 200.412 Classification of costs must be treated consistently in like circumstances.)*

**SECTION I. EXCEPTIONAL CIRCUMSTANCES**

DEFINITION: The nature of the sponsored project requires an extensive amount of administrative and/or clerical support or goods/services significantly greater than the routine level provided by the academic department. (Check box(es) below, as appropriate.).

Large, complex program, such as Clinical Research Center, program project, environmental research & engineering research center & project that entail assembling & managing teams of investigators from a number of institutions.

Project involves extensive data accumulation, analysis & data entry, surveying, tabulation, cataloging, searching literature, & reporting, such as epidemiological studies & clinical records

Project requires making travel & meeting arrangements for large numbers of participants, such as conferences and seminars.

Project's focus is the preparation & production of manuals & large reports, books & monographs (excluding routine progress & technical reports).

Project is geographically inaccessible to normal departmental administrative services.

**SECTION II. TYPES OF COSTS**

(Check box (es), as applicable and complete information in Section III and/or IV).

Administrative/Clerical Salaries

Other Expenses

Postage

**Local Telephone Service** (Long distance charges pertaining to research project do not require a CAS exemption.)

**Office Supplies**

**Data Processing/Computer Supplies** (Research/Lab Supplies required to advance the research project do not require a CAS exemption.)

**General Purpose Software** (Technical Computer Software required to perform the research project does not require a CAS exemption)

**Memberships**

**Subscriptions**

**SECTION III. DESCRIPTION/EXPLANATION OF ADMINISTRATIVE & CLERICAL SALARIES**

A. Provide name of employee, job title, job code, percent of effort, salary and a description of their responsibilities.

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B. Describe the exceptional circumstances of the project.

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C. Explain why such services being provided to the project by the administrative/clerical staff are significantly greater than the routine level of such services provided by the academic unit.

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D. Explain why the costs were not included in the proposal budget.

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**SECTION IV. DESCRIPTION/EXPLANATION OF OTHER EXPENSES**

A. Describe each item being requested, the quantity and cost.

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B. Explain why such items are significantly greater than the routine level of such items provided by the academic unit.

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C. Explain why the costs were not included in the proposal budget.

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**SECTION V. REQUIRED ENDORSEMENTS**

By signing below, the Principal Investigator, Department Chair/Center Director, and Dean **agree** to ensure that full compliance to the University's CAS policy is achieved and maintained. Payback of CAS **violations** and/or disallowed exemptions will be the responsibility of the College, Department, Center and Principal Investigator.

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Principal Investigator's Signature

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Date

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Department Chair/Center Director's Signature

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Date

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College Dean's Signature

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Date

Prepared By: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

Office of Sponsored Research Director	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
_____ Signature	_____ /Date

Division of Research Vice President	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
_____ Signature	_____ /Date

**REQUIRED CAS ATTACHMENT**

*(Complete the information below and attached to CAS Form)*

Name of Project: \_\_\_\_\_

Type and Agency Source: \_\_\_\_\_

IDC Rate: \_\_\_\_\_

Project #: \_\_\_\_\_

Project Summary: *(Provide a detailed description of project)*

Identify Exceptional Circumstances: *(Provide a detail justification below exceptional circumstances identified to support the request below)*

- Large, complex program, such as Clinical Research Center, program project, environmental research & engineering research center & project that entail assembling & managing teams of investigators from a number of institutions
- Project involves extensive data accumulation, analysis & data entry, surveying, tabulation, cataloging, searching literature, & reporting, such as epidemiological studies & clinical records
- Project requires making travel & meeting arrangements for large numbers of participants, such as conferences and seminars
- Project's focus is the preparation & production of manuals & large reports, books & monographs (excluding routine progress & technical reports)
- Project is geographically inaccessible to normal departmental administrative services

Budget Items Requested: *(Provide a detailed description of CAS budget items requested for CAS)*