The University of Idaho does not typically allow voluntary cost share (match) to be offered. Cost sharing of project expenses beyond the minimum required by the sponsor is strongly discouraged and must be fully justified and approved by the VPRED or delegate. To request permission to offer voluntary committed cost share the Principal Investigator of the project must complete the information below and on Attachment A and submit these forms and all required attachments to the Office of Sponsored Programs (OSP) pre-award team or upload to VERAS with enough time in advance of the proposal due date to allow compliance with the four-business day rule, which requires that final documents in final form are ready for final review no less than four full business days prior to the submission deadline. .

OSP will review and submit the request to the Office for Research and Economic Development (ORED) Vice President for Research (VPRED) for review and a decision.

Note: Voluntary committed cost share is different from institutional commitment and uncommitted cost share. Please speak with your Departmental Grant Administrator (DGA), or the OSP Pre-Award team if you have questions. Also see the FAQs posted [here](https://www.uidaho.edu/research/faculty/submit-proposal/proposal-faqs#accordion-row-6a211555-2ea8-4cb2-80e5-eac5763d1cb0-) on cost share.

|  |  |  |
| --- | --- | --- |
| **Principal Investigator:** | | |
| **Home College:** | **Home Dept:** | **PI Phone:** |
| **Submitting Department:** | | **DGA Name:** |
| **Sponsor Name:** | | **VERAS Proposal #:** |
| **Prime Sponsor Name:** | | |
| **Project Title:** | | |
| **Does this proposal support full University of Idaho F&A? Yes**  **No**  **F&A rate:** | | |

|  |  |  |
| --- | --- | --- |
| **Required Cost Share** | **Voluntary Cost Share Requested** | **Total Cost Share Requested** |
| **$:**  **% of Project Costs:** | **$:**  **% of Project Costs:** | **$:**  **% of Project Costs:** |

Certifications and Approvals:

I hereby certify that the attachments including costs and/or budget number(s) stated on this form represent costs and/or projects directly related to the proposed project and represent allowable cost sharing per 2 CFR 200, the agency/sponsor policies and regulations, and University of Idaho policy.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Investigator Date

I authorize the use of funds as described in this waiver request and attachments for the purposes of cost sharing for this project from the department/unit account listed on Attachment A. I understand that the proposing unit is responsible for contributing these commitments to the project, including third-party commitments if the third party fails to provide its promised contributions. I understand that as Dean/Director that I am responsible for verifying that the PI and/or cost share provider(s) (Co-PIs, etc.) have the appropriate level of effort available to allocate the requested salary/fringe as voluntary cost share to this project.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean/Director Date

***\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*OFFICE OF RESEARCH AND ECONOMIC DEVELOPMENT USE\*\*\*\*\*\*\*\*\*\*\*\*\*\****

I approve this voluntary cost share commitment

**F&A distribution to college not reduced**

**F&A distribution to college reduced**

**Disapprove**

**Explanation for disapproval:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President for Research and Economic Development Date

**Attachment A**

1. Complete the budget information below and attach any letters of commitment for third-party cost share. In the second section please provide detail on the University of Idaho portion of the cost share (double-click to use table).



**University of Idaho cost share budget(s) and amount(s):**

|  |  |
| --- | --- |
| **Index number** | **Cost share amount and description** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. Is this voluntary cost share requested by the sponsor? Yes  No 
   1. If Yes, explain and attach documentation:
2. Does this project support the University of Idaho Carnegie R1 Initiatives? Yes  No 
   1. If yes, explain:
3. Does this project fully support one or more graduate assistants or post docs? Yes  No
4. Provide a copy of your current project abstract and narrative:
5. Describe the additional expense items that will covered by the voluntary cost share:
6. Will there be a change in the scope of work if the voluntary cost share is not approved?  Yes  No
   1. If “yes,” please describe the changes:
7. Describe, in detail, the reasons that the voluntary committed cost share/match is being requested. Be specific and attach any documentation from the agency that supports your reason(s):
8. Describe the effect the voluntary committed cost share will have on this project (and any related project) both if approved and if denied. Give specific details as to any objectives, goals or plans that may be impacted by the decision on this request: