USF F&A RATE EXCEPTION REQUEST

1. CAMPUS INFORMATION

Requested By: _____ Date: _____

Email: _____ Telephone: _____

2. PROJECT INFORMATION

Sponsor Name: _____

Project Title: _____

Project Type: ____ Instruction ____ Research ____ Other Sponsored Activity

Location: ____ on-campus ____ off-campus

3. REQUEST INFORMATION

Request for: _____ Waiver of rate: ____ Reduction of Rate to ____% of TDC

Reason for waiver request:

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|---|
| |

4. ANALYSIS (To be provided by the Office of Sponsored Projects)

Using USF Rate ____% of $_____ = $_____
Using Sponsor Rate ____% of $_____ = $_____
Estimated Loss $_____

| | |
|---|---|
| Request Approved.<br><br>_____<br>Provost/Associate Provost (Date) | Special Conditions: |