



# Office of Institutional Effectiveness

## Grants and Sponsored Programs

### Program Director/Principal Investigator, Fellow and Sponsor Assurance Form

This form is designed to comply with the requirements of NIH notice [NOT-OD-06-054](#).

It is a compliance requirement that applicant organizations to the Public Health Service (PHS) must secure and retain a written assurance from each PD/PI prior to submitting each application to the PHS.

As a PD/PI submitting an application to the PHS, Manchester University must retain a unique signature and date for your application. If multiple PD/PIs are proposed in an application, this assurance must be retained for all named PD/PIs. This assurance will be available to the sponsoring agency or other authorized HHS or Federal officials upon request.

#### Assurance Certifications

By signing below, I certify:

- 1) that the information submitted within the application is true, complete and accurate to the best of the my knowledge;
- 2) that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties; and
- 3) that I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of the application.

NIH Program Announcement Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_