

Closeout Form

PROCEDURE

When the College agrees to accept the Terms and Conditions of a sponsored project, the Institution assumes significant legal and financial obligations. Therefore, it is imperative that the College foster a culture of fiduciary compliance for all sponsored projects (Policy 1.111).

The Office of Grants and Contracts (OGC) oversees and monitors all sponsored projects awarded to the College and interfaces with the applicable Principal Investigator (PI) (or Project Director [PD]), Vice President for Finance and Administration (VPFA), Budget Office, and Controller's Office to ensure award compliance (Policy 1.111).

PI/PDs should be aware of the closing dates of their awards in order to complete the technical aspects of the project, as well as close-out all financial obligations in advance of the project termination date. Project accounts will be inactivated on the end date and only allowable charges will be allowed to post after that date. Any charges incurred after the termination date will become the responsibility of the PI/PD's respective department (Policy 1.111).

The PI/PD will be responsible for completing the Closeout Form, obtaining digital ID approval signatures from their immediate supervisor, and forwarding the completed Closeout Form to the OGC (See Table 1: Distribution Matrix).

One (1) Closeout Form should be completed for each awarded project for which you are a PI: If you are the PI on several awarded projects you will need to complete a separate Closeout Form for each awarded project.

The completed Closeout Form should be submitted to the OGC as soon as possible following the end date of the sponsored project.

Table 1: DISTRIBUTION MATRIX

Closeout Form Recipients	Distribution Required
Responsibility of the PI	
Immediate Supervisor of the PI	Always Required
Office of Grants and Contracts	Always Required

INSTRUCTIONS



Download this form to your desktop **and** open the form in **ADOBE PDF** before starting. **This form will NOT work correctly in your web-browser.**



Make sure the 'Show border hover color for fields' in Adobe PDF is 'checked'. You will only need to complete this requirement if you have altered the default settings of Adobe PDF on your computer.

1 2 3

Please complete each question in the order it appears on this form. Some of the items on this form are dependent upon the answers to previous questions.



Mandatory fields and Mandatory Requirements on this form are highlighted in '**RED**'.



Use the '**GREY**' buttons to attach all required and / or additional documents to this form. **Each attachment should be easily identifiable by name and should be attached as a separate PDF (i.e., Do not combine all attachments into one PDF).**



Information icons have '**GREEN**' borders and '**BLUE**' circles.



Use the 'Save' icon to save the form as a fillable PDF file. **Please do not 'Print to PDF' or scan a hard copy of this form.**



Use a **Digital Id Signature** when signing this Form.



Click the '**YELLOW**' button to pause routing of this document, and identify any modifications that may be needed.



Click the '**GREEN**' button to send this document to the next reviewer.

AWARDED PROJECT DATA

BASIC INFORMATION

1. Project Title:
2. LCSC Account Number:
3. OGC Tracking Number (If Available)

PERFORMANCE PERIOD

4. Start Date:
5. End Date:

PRIMARY SPONSOR

6. Primary Sponsoring Organization Contact Information.
Name:
Website:

SUB-SPONSOR (If Applicable)

7. Sub-Sponsoring Organization Contact Information.
Name:
Website:

PRINCIPAL INVESTIGATOR/PROGRAM DIRECTOR

8. Principal Investigator/Program Director (PI/PD) Contact Information
Name:
Office e-Mail:
Office Phone:

REPORTS

9. Have you confirmed that all the required '**REPORTS**' (i.e., progress reports, financial reports, etc.) have been submitted for this awarded project?
NOT APPLICABLE
NO – Please explain why you have not submitted all the required reports.

YES

10. Have you confirmed that all '**PROGRAM ACTIVITY REPORTS**' (i.e. Time & Effort Reports) associated with this award have been completed correctly and certified by the appropriate supervisor?

NOT APPLICABLE

NO – Please explain why you have not confirmed all Program Activity Reports associated with this award have been completed correctly and certified by the appropriate supervisor.

YES

11. Have you confirmed that a '**PHYSICAL ASSETS INVENTORY**' of the Capital Equipment purchased with the award has been created?

NOT APPLICABLE

NO – Please explain why you have not created a Physical Assets Inventory of the Capital Equipment purchased with the award.

YES

12. Have all '**PATENTS, DISCOVERIES OR INVENTIONS**' that occurred as a result of funding from the award been properly reported to the College?

NOT APPLICABLE

NO – Please explain why you have not reported all Patents, Discoveries or Inventions that occurred as a result of funding from the award.

YES

EXPENSES

13. Were all the **EXPENDITURES** (e.g., salary, travel, supplies, etc.) associated with this award **'ALLOWABLE', 'ALLOCABLE'** and **'REASONABLE'**?

NOT APPLICABLE

NO – Please explain why expenditures associated with this award have are not 'Allowable', 'Allocable', and 'Reasonable'.

YES

14. Have all **'COST SHARE/MATCHING COMMITMENTS'** been met?

NOT APPLICABLE

NO – Please explain why you have not fulfilled the all 'Cost Share Commitments'.

YES

15. Have all sources of **'PROGRAM INCOME'** (i.e., revenue generated by award activity) been reported?

NOT APPLICABLE

NO – Please explain why you have not reported all sources of 'Program Income'.

YES

16. Have **'EXPENDITURES'** exceeding the awarded amount (i.e., deficits) been managed in accordance with applicable regulations/guidance?

NOT APPLICABLE

NO – Please explain why you have not reported all sources of 'Program Income'.

YES

ASSURANCE AND ACKNOWLEDGEMENT

17. I have adhered to the applicable requirements of Federal Guidance (i.e., Code of Federal Regulations [CFR] 200) while managing this award.

- NO
- YES

18. I have adhered to the applicable requirements of the Idaho State Board of Education Grants and Contracts Policy while managing this award.

- NO
- YES

19. I have adhered to the requirements of applicable LCSC Policies while managing this award.

- NO
- YES

20. I have fulfilled the reporting obligations of this awarded project, as defined in the projects terms and conditions.

- NO
- YES

ROUTING & APPROVALS

Note: The preparer of this document is responsible for identifying all needed e-mail address. Please do not 'Print to PDF' or send a scanned copy of this form for signature routing.

Is someone other than the PI/PD or the PI/PD's Supervisor preparing this form (e.g., administrative assistant, etc.)?

- NO
- YES

I certify I have reviewed this Closeout Form and its attachments, and the information provided is complete and accurate, and any concerns and questions I have regarding this Closeout Form have been adequately addressed by the PI.

Signatory/Approver	LC State e-mail	Digital ID Signature	Action	
			Disapprove	Approve
Administrative Assistant, etc.:				
PI/PD				
PI/PD Supervisor:				

CONTROLLER'S OFFICE USE ONLY

Date Received:

Received By:

Close-Out Questions	Answer		
	NA	NO	YES
All project financial transactions have been reconciled.			
All cost transfers have been properly documented.			
All encumbrances have cleared.			
All Journal entries have been completed and processed.			
All chargebacks have been processed and are reflected on the project report.			
All Sub-Recipients' final invoices have been paid.			
Final payroll/compensation documents have been processed and are reflected accurately on payroll reports from the Budget Office.			
Expenditures exceeding the Award amount or specific line items have been managed in accordance with applicable regulations.			
All subrecipient invoices, including final invoice, have been received, approved by the PI/PD, and processed for payment.			
Budget status for this award has been identified as 'Closed' by the Controller's Office.			

Action

Closed on:

Notes:

Action taken by:

File Name:

GRANTS AND CONTRACTS OFFICE USE ONLY

PI Submission

Date Received:

Received by:

Unique ID Assignment:

Date

Account

OGC Number

Closeout ID

Date PI is notified that the OGC has received form:

File Name:

Review - Distribution

Date Sent to Controller's Office for closeout:

Sent by:

Review - Receipt

Date Received from Controller's Office verifying closeout:

Received by:

Date PI is notified that the award has been formally closed:

File Name:

Notes