

## SRS Contingency Account Request Form

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**PI Name:** \_\_\_\_\_ **SRS Proposal #:** \_\_\_\_\_  
**Project Title:** \_\_\_\_\_  
**Sponsor:** \_\_\_\_\_  
**Anticipated Award Amount:** \_\_\_\_\_ **Anticipated Start Date:** \_\_\_\_\_

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1. Please attach any communication/notification that you have received indicating that an award is forthcoming? If there is no communication available, please provide details.
  
2. Rationale for contingency spending:
  
3. Please note any special conditions or limitations (e.g. dollar level of backing funds, end date for the contingency, only authorizing certain types of costs etc.):
  
4. What is the source of the backing funds (*source authorizing signature required below*)?
  - Department:
  - College or Division:
  - Discretionary Account #: 01.                    .XXXXX.                    .00000
  - Other: Please specify source and pertinent details in the space immediately below

*By signing this form, I understand that if funding is not received from the sponsor or costs fall outside the approved period of performance, I will be responsible for funding the expenditures that have been charged to this project account.*

**Approved by:**

\_\_\_\_\_  
 Signature \_\_\_\_\_  
 Date  
 Name:  
 Title:

Please send your completed and signed request to: [PostAward@rit.edu](mailto:PostAward@rit.edu)

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**Internal SRS Use Only**

**Notes:** \_\_\_\_\_ **VPR Signature:** \_\_\_\_\_