

**CO-PRINCIPAL INVESTIGATOR
PROFILE AND CERTIFICATIONS**

Must accompany Center for the Advancement of Science in Space (CASIS) Proposal Submissions

Proposed Project Title:	
Co-Principal Investigator (PI):	
Physical Address:	Mailing Address:
Email Address:	

Please provide an answer to all questions below regardless of whether or not the accompanying proposal is seeking funding from the Center for the Advancement of Science in Space (CASIS).

“U.S. Person” Status

The co-principal investigator (“Co-PI”) qualifies as a “U.S. Person” under 22 U.S. Code §6010.

YES ☐ NO ☐

All “YES” answers to the following questions must be explained on a separate page submitted with this questionnaire.

Ethics and Research/Data Integrity

Prior Violations

Indicate whether the Co-PI has been accused or convicted of engaging in any ethics violations, or research or data integrity violations, including any instances of fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.

YES ☐ NO ☐

Terminations

Indicate whether the Co-PI has, in the past five years, had any federal grant, cooperative agreement, subaward, or federal contract or subcontract terminated for cause or default.

YES ☐ NO ☐

Prior Regulatory Violations

Indicate whether the Co-PI, in the past five years, has been accused or convicted of engaging in any violation of law in connection with the award or performance of any federal grant, cooperative agreement, subaward, or federal contract or subcontract.

YES ☐ NO ☐

A “NO” answer to the following question must be explained on a separate page submitted with this questionnaire.

Debarment or Suspension

The Co-PI certifies that: he/she is eligible to do business with the U.S. federal government; is not debarred; does not have criminal convictions or civil judgments against him/her for fraud,

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embezzlement, theft, forgery, bribery, or misrepresentation; and has not had a federal or state government contract terminated for cause or default.

YES ☐ NO ☐

Certification Regarding Lobbying for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies that no federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement. If any such federal appropriated funds have been paid or will be paid, please contact the CASIS Contracts and Compliance Department at contracts@issnationallab.org for a disclosure form.

Certifications to Implement Restrictions in Appropriations Acts

The undersigned certifies that he/she will comply with the funding and administrative requirements in the Consolidated and Further Continuing Appropriations Act.

Certification

Is the undersigned aware of any fact or circumstance not otherwise disclosed in his/her proposal or in response to this questionnaire that might pose a risk to his/her ability to successfully perform under an agreement, if awarded? **A "YES" answer to this question must be explained on a separate page submitted with this questionnaire.**

YES ☐ NO ☐

By the signature of the Co-PI below, he/she certifies that the representations and certifications made herein are accurate and current as of the date of signature. If any representations and certifications contained herein change prior to entering an agreement with CASIS, the Co-PI shall immediately notify the CASIS Contracts and Compliance office at contracts@issnationallab.org.

This certification constitutes material representations of fact upon which reliance is placed by CASIS regarding acceptance of a proposal and entering into an agreement.

Signature: _____ Date: _____

Printed Name: _____

Title: _____

Organization: _____