



Veterans Health Foundation

Improving Veteran Lives Through Research and Education

PETITION FOR EXCEPTION TO INDIRECT COST RATE

DATE:

FROM (VA PI):

TITLE OF PROJECT:

FUNDING SOURCE:

PASS-THROUGH ENTITY (IF SUBAWARD):

GRANT SUBMISSION DATE:

PERIOD OF AWARD:

INCREMENTAL BUDGET/SUBAWARD PERIOD OF PERFORMANCE: _____ to _____

OVERALL PROJECT BUDGET:

REDUCED RATE REQUESTED:

STATEMENT OF WORK: Briefly describe the work activities to be performed under the proposed contract, who will perform them, the timeline, and deliverables.

EXCEPTIONAL CIRCUMSTANCES LEADING TO THIS REQUEST:

AREA OF RESEARCH AND PROGRAMMATIC BENEFIT OF THIS PROJECT TO VA OR VHF:

COMPLEXITY OF AWARD ADMINISTRATION AT VHF (E.g., MOUs, JPAs, subawards, participant payments, contract negotiations, hiring, reporting, purchasing)

PLANS/ATTEMPTS TO COVER ADMINISTRATIVE COSTS VIA ALTERNATE MEANS:

CAREER STAGE OF PI AND OTHER AVAILABLE RESEARCH FUNDING:

PLANS FOR FUTURE GRANT SUBMISSIONS THROUGH VHF (NON-VA GRANTS ONLY):

PLEASE SUBMIT DOCUMENTATION OF THE FUNDING AGENCY'S PUBLISHED IDC POLICIES WITH YOUR REQUEST.

**RETURN COMPLETED FORM AND SUPPORTING DOCUMENTS TO
GRANTS@VETERANSHEALTHFOUNDATION.ORG**