



UC San Diego

Policy & Procedure Manual

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CONTRACTS AND GRANTS (RESEARCH)

Section: 150-65

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REQUEST FOR APPROVAL PROCEDURES UNDER ORGANIZATIONAL/INSTITUTIONAL PRIOR APPROVAL SYSTEM (OPAS/IPAS)

I. RELATED POLICIES

UCSD Policy and Procedure Manual (PPM)

- [150-60](#) Institutional Prior Approval System Requirements for Public Health Service (PHS) Research Grants
- [150-61](#) Organizational Prior Approval System Requirements for National Science Foundation (NSF) Research Grants
- 380-4 Budget Adjustment Journal Preparation
- 380-5 Budget Adjustments to Extramural Funds (Federal, State, Local Government, and Private Contracts, Grants and Donations)
- [522-2](#) Equipment Screening
- [523-10.1](#) Independent Consultants

II. INTRODUCTION

The purpose of this policy is to outline the procedure to be followed in completing the *Request for Approval Under Organizational/Institutional Prior Approval Systems* (OPAS/IPAS), Form FO 2070. This form is to be used for rebudgeting and other OPAS/IPAS actions for NSF and PHS funds. Requests for use of funds in advance of receipt of the award should be processed on the *Advance Approval to Establish Accounts and Incur Expenses*.

III. POLICY

In accordance with NSF and PHS policies, this form implements UCSD requirements for an Organizational/Institutional Prior Approval System. Individual agency policies and procedures are detailed in PPM [150-60](#) and [150-61](#), as noted under Section I., Related Policies.

The *Request for Approval Under Organizational/Institutional Prior Approval System* (OPAS/IPAS) form is not required when requesting advance approval under the Biomedical Research Support Grants. All requests are to be forwarded to the appropriate Dean's Office for review and approval.

IV. PROCEDURES

- A. The *Request for Approval Under Organizational/Institutional Prior Approval System* Form (OPAS/IPAS)

The following is a listing of the items that appear on the form. Instructions for completing each section are provided, and it is the department's responsibility to complete and route the form as indicated. (See [Exhibit A](#))

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1. Indicate the name and department of the Principal Investigator. It is not necessary to list Co-Principal Investigators.
2. Indicate the PHS or NSF Grant Number, or Contract number exactly as set forth on the award document. Also indicate the UCSD account and fund number.
3. Indicate the beginning and ending dates of the budget period affected. In the case of PHS grants indicate the dates of the current budget year and the project period termination date. In the case of NSF grants include the flexibility period.
4. Identify the actions requiring approval by checking the appropriate box(es).
5. The dollar amount for each transaction must be specified as well as the applicable budget categories and sub-accounts. For example: \$1,500 from personnel/sub 2 to equipment/sub 4. Attach *Budget Adjustment Journal*, UFIN 1521, *Equipment Screening Certification* form and any other required documents.
6. The Principal Investigator is responsible for providing a brief but comprehensive explanation/justification describing the scientific, technical or administrative reason(s) for all requests. As a minimum, the justification must address the following:
 - a. A brief description of the proposed action;
 - b. Scientific, technical or administrative reasons for the action (include a statement as to the scientific benefit which will accrue to the project as a result of the request);
 - c. Explanation of why the funds are available (specify budget categories, including indirect costs, if applicable);
 - d. For requests concerning travel or the purchase of equipment the following specific areas must be addressed:
 1. Travel
 - a. Itemization of costs, i.e., air fare, per diem, registration fee, etc.;
 - b. Purpose, date, and place of travel;
 - c. Relationship to research;
 - d. Indicate the relationship of the traveler(s) to the research project.
 2. Equipment
 - a. Description of the equipment. If more than one item requested, itemize the description and cost for each;
 - b. Reason(s) for the request;
 - c. How the proposed purchase impacts the continuous operation of the project as outlined in the original proposal;

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- d. The effect of rebudgeting of funds between categories of the approved budget has on the scope or work or objective of the project;
- e. Requests for purchase of equipment over \$1,000 must include a completed copy of the *Equipment Screening Certificate*.

7. Date and Signature

- a. Requires date and signature of the Principal Investigator certifying that the proposed changes are consistent with the scope and objectives of the project, as approved by the sponsoring agency.
- b. Requires date and signature of the Department/Division Chair certifying the scientific and technical propriety, project relevance, and effective utilization of Institutional resources. Also requires the initials of the Management Services Officer (MSO) by those of the Department Chair, certifying the completeness and correctness of the *OPAS/IPAS Request*.
- c. Requires date and signature of the Contract and Grant Officer, OCGA, certifying the requested adjustment is in accordance with University and Federal Regulations.

B. Distribution and Routing

- 1. Principal Investigator, via the MSO, forwards the completed *OPAS/IPAS Request*, *Budget Adjustment Journal* (PPM 380-4) (and *Purchase Order Requisition*, if the *OPAS/IPAS Request* concerns the acquisition of Equipment) to the Department/Division Chair.
- 2. Department/Division Chair signs *OPAS/IPAS Request* and, if acceptable, forwards the entire package to the Contract and Grant Officer, OCGA.
- 3. Contract and Grant Officer distributes approved *OPAS/IPAS Requests*, *Budget Adjustment Journals* and *Purchase Order Requisitions* to appropriate offices.
- 4. Supervisor, Extramural Funds Accounting, implements the *OPAS/IPAS Request* and processes the *Budget Adjustment Journal* for completion of rebudgeting action.



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CONTRACTS AND GRANTS (RESEARCH)

Section: 150-65 EXHIBIT A

Effective: 06/25/1984

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EXHIBIT A

UNIVERSITY OF CALIFORNIA, SAN DIEGO REQUEST FOR APPROVAL UNDER ORGANIZATIONAL PRIOR APPROVAL SYSTEM (OPAS) (Reference: See UCSD Policy and Procedure Manual [150-65](#) for instructions)

- Principal Investigator: _____ Department: _____
- Agency Award No.: _____ UCSD Account & Fund No.: _____
- Budget Period Affected (dates): _____ to _____
- Approval is requested fir the following action(s):

- | | | |
|--|--|---|
| <input type="checkbox"/> Domestic Travel | <input type="checkbox"/> Equipment Acquisition
(specify each item of
equipment in No. 6 below) | <input type="checkbox"/> Subcontracting
Project Effort |
| <input type="checkbox"/> Foreign Travel | <input type="checkbox"/> No-Cost Time Extension | <input type="checkbox"/> Other Specify
in No. 6 below) |

Please Note: Request for incurring pre-award costs should be processed on the *Advance Approval to Establish Accounts and Incur Expenses* form.

_____	_____	_____
Principal Investigator	Grant No.	Account and Fund No.
_____	_____	_____
Principal Investigator	Grant No.	Account and Fund No.

- Approval will will not require rebudgeting. (If rebudegting is required, indicate amounts and budget categories which will be affected and attached Budget Adjustment Journal).

\$ _____ from _____ to _____ (Budget Category /Sub Acct.)
(Budget Category/Subcategory)

\$ _____ from _____ to _____ (Budget Category /Sub Acct.)
(Budget Category/Subcategory)

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\$ _____ from _____ to _____ (Budget Category /Sub Acct.)
(Budget Category/Subcategory)

6. Explanation/Justification:

7. Certifications and Approvals:

This request is consistent with the scope and objectives of the project as approved by the sponsoring agency.

Principal Investigator / Date

The scientific and technical propriety of this request had been reviewed and approved. The action requested will result in the effective utilization of institutional resources.

Department Chair or ORU Director / MSO Initials / Date

This request has been reviewed for consistency with sponsoring agency and University policies and approved.

ONR Resident Representative / Date

Contract and Grant Officer / Date

Copies to:

WHITE – OCGA

GREEN – Principal Investigator

CANARY – Accounting Office

PINK – Management Services Officer

GOLDENROD – Purchasing (for equipment purchases and Subcontracts costs only)