**Department:** _____ **Month/Year** _____

**College of Arts and Sciences Chair Monthly Review of Grants and Contracts**

Re: Potential Fiscal Issues and General Status of Grants

| | | | **checkmark** |
|---|---|---|---|
| 1 | Each speed type of the Department is being reconciled on a monthly basis…….. | YES | |
| 2 | University Report XXX was printed and reviewed this month……..…….. | YES | |
| 3 | Each grant and contract of the department was reconciled this month……. | YES | |
| 4 | All PI's reviewed and approved their monthly reconciliations…… | YES | |
| 5 | All faculty and required staff completed Conflict of Interest annually……..……..…….. (UBM-29) | YES | |

**The following issues and corrective actions have been idenitified.**

| | **speedtype** | **issue** | **action** |
|---|---|---|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |

Note: Attach additional information on separate page if required

Department Chair:

_____ print _____ signature _____ date

Business Manager(s)

_____ print _____ signature _____ date

_____ print _____ signature _____ date

**After completion each month, please email a signed copy of this report to Robert M. Buchanan, Assoc. Dean of Research**

Accept:

_____ signature _____ date