This form has been updated on October 14, 2024. It supersedes ALL previous versions.

Office of Research Administration

ADVANCED ACCOUNT NUMBER AUTHORIZATION (AANA)

Please complete this form, including signatures by Principal Investigator (PI) and Department Chairperson/Director of administering unit. Send the completed and signed copy to ORA via email to your Contract Administrator directly or to oraa@umd.edu. Outstanding Compliance issues must be addressed prior to any award being created.

Department Name

Request for _____

- ☐ An advance account number
- ☐ Pre-Award Costs
- ☐ Lifting the end date of an existing project in anticipation of receipt of a formal end date extension by the sponsoring agency

Project Title _____

KR Institute Proposal Number _____ or KR Award ID _____

Principal Investigator _____ Sponsor _____

Requested Start Date for account _____ or ☐ Request to lift end date of existing project

Expected Value of Award $ _____

Requested Expense Authorization $ _____ (to be monitored by Department)

Default USource Worktag to be charged, **required** _____

This default USource Worktag, will be charged to clear any deficit resulting from failure to receive award or for unallowable costs occurring outside of the period of performance authorized under the award terms.

Person at sponsor to contact for information (if known)

Name/Title

Telephone _____

Email _____

Fax _____

_____

We hereby authorize the Office of Research Administration to initiate action to assign or continue an account number to be used for incurring costs for the above project provided all Compliance issues have been resolved.

This authorization commits the department to reimburse campus central accounts for any deficit that might result if an appropriate award or amendment is not forthcoming or for any unallowable costs incurred if the pre-award cost period exceeds sponsor rules.

Signatures

Principal Investigator

_____ Date _____

Department Chair/Director/Unit Head or Designee

_____ Date _____