



Request for Subaward Modifications

Office of Sponsored Projects

Subaward (required information)

Org. Number	Fund Number	Subaward Number

Modifications (Check all that apply)

No-cost extension New End Date

Supplements (i.e. Cost Modifications)
 Adds new money and increases the total estimated cost for the project. May be associated with Supplemental Scope of work or scope of work change.
 *Must include the following:

*Statement of work revision
 *Detailed Budget
 New Supplement Amount

Incremental funding
 (adds time and/or money without changing the total estimated cost for the project)
 * Please attach any documentation related to this request.

Funding Committed This Action	Total Funding Committed	Cost Share Committed this Action	Total Cost Share Committed

A "Key Person" identified in the subaward is changed as follows:

Current:	Changed to:

Miscellaneous Requests
 Please provide a summary of request and attach any documentation that would facilitate the subaward administrator.

Rate of spending and technical progress of subrecipient are at acceptable/expected levels to date.

I certify that the information on this request form is accurate and complete as of this date. I agree to accept responsibility for monitoring compliance with the terms of the subaward and prime award. By signing this form, I am granting permission to the Subaward Unit of the Office of Sponsored Projects to issue a subaward to the entity listed on this form.

Principal Investigator Departmental/Center Contact