

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

Does this project have a TCP (technology control plan)?

If yes, TCP #

Supplements (i.e. Cost Modifications)

Adds new money not originally included in the budget 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

Budget Justification

(adds time and/or money without changing the total estimated cost for the project)

* Please attach any documentation related to this request. (Budgets , Justifications, etc.)

Funding Committed
This Action

Total Funding Committed

Cost Share Committed
this Action

Total Cost Share Committed

New End Date

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

Dean/Director