

Request for Approval of Administrative Action

¾ Complete the information below and email to Sponsored Programs Administration

¾ Before requesting administrative action, please refer to award terms and conditions cited/referenced in the award document and/or Amplifund.

Contact Information

PI Name:	
Department Contact Name:	

Award Information

Sponsor Award Number	
Grant Subaccount (e.g. 400.001)	
Budget Period Affected (mm/dd/yyyy to mm/dd/yyyy)	

Requested Action

<input type="checkbox"/> No rCostExtension(NCE)	<input type="checkbox"/> Absence or Change of PI
<input type="checkbox"/> Approval of Carryover Funds	<input type="checkbox"/> Significant Reduction of Effort
<input type="checkbox"/> Significant Rebudgeting Request	<input type="checkbox"/> Change in Other Key Personnel
<input type="checkbox"/> Addition of Subaward	<input type="checkbox"/> Other (describe below)

New end date being requested for NCE extension: (mm/dd/yyyy)

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Anticipated funds available during NCE or amount Carryforward:

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Scientific/Programmatic Justification (include the scientific rationale for the action and, where appropriate, a breakdown of the costs involved and an explanation of why the funds are available)

Signature of PI	Date
Approvals	
Director, Sponsored Programs Administration	Date
Department Chair	Date
Authorized official	Date