

Project Modification Request

DATE: _____	
Project Investigator/ Director	Grant/ Proposal/ Fund
Project Title	
BUDGET MODIFICATION	
Previous Budget: _____ Proposed Budget Change: _____ Total New Budget: _____	
CHANGE REQUEST	
Choose one of the following options below:	
<input type="checkbox"/>	PI/Key Personnel Changes, Complete Section A <i>Requests to add new personnel or changing existing PI/PD roles within the award period.</i>
<input type="checkbox"/>	Disengagement of PI for 90 Days or More, Complete Section B <i>Funding agencies expect the PI to manage the project and meet objectives and timelines. If the PI will be absent for 90 days or more (e.g., sabbatical, leave), advance notification to the agency is required. Note that the agency may not automatically approve the substitute or updated plan.</i>
<input type="checkbox"/>	Other, Complete Section C <i>Example would include but is not limited to: Transfer Award to Another Institution, etc.</i>
Section A: PI/Key Personnel Changes	
<p>A-1: Justification related to the project, including any proposed changes in scope Click or tap here to enter text.</p> <p>A-2: Effective date of the proposed change (must be in the future, allowing time for funding agency to review the request, generally at least 30 days in advance) Click or tap here to enter text.</p> <p>A-3: Budget changes resulting from the proposed change Click or tap here to enter text.</p> <p>A-4: Do you (or your relatives) have any conflicts of interest with the sponsor or related entities (e.g., equipment vendors, subcontractors)? Conflicts include financial interests, income, consulting roles, or advisory positions with these entities. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

A-5: *If new to the project, attach PI/Key Personnel materials*

- *Biosketch in agency format*
- *Current and pending*
- *Conflict of Interest Disclosure*

Section B: Disengagement of PI/Co-PI for 90 Days or More

B-1: *Name of PI/Co-PI who will be disengaged for 90 Days or More*

Click or tap here to enter text.

B-2: *Dates during which the PI/Co-PI will be disengaged*

Click or tap here to enter text.

B-3: *Detailed plan of how the project will be carried out in the PI/Co-PI's disengagement*

Click or tap here to enter text.

B-4: *If the PI is disengaging, who will be named at the Dates during which the PI will be disengaged*

Click or tap here to enter text.

Section C: Other

C-1: *Describe the award modification needed.*

Click or tap here to enter text.

REQUESTOR(S)

Principal Investigator/ Director DATE: _____

CO-Principal Investigator/ Director (if applicable) DATE: _____

APPROVALS

Grants Specialist DATE: _____

Department Head DATE: _____

Provost/ Vice-Provost DATE: _____

INSTRUCTIONS

Principal Investigator/ Directors must use this form to request modifications to active, funded projects. The following are most common types of award modifications, and usually requires funding agency review and approval.

Please complete the information requested and obtain the appropriate signatures. Completed forms must be sent to the Office of Sponsored Programs, Eiben 206.

Revised: 07/27/24