**GRANT CHANGE REQUEST FORM**

*All changes relating to the use of grant funds and/or the scope of project activities during a project’s funding cycle must be approved by the Sustainable Campus Initiative Fund. Detail proposed changes below, and attach any additional information as necessary.*

PROJECT TITLE: Click here to enter text.PROJECT EXECUTIVE(s):Click here to enter text.GRANT FUNDS REMAINING (e.g. $500 of $1000) : $Click here to enter text. of Click here to enter text.

**FOR IN OFFICE USE ONLY:**
Date Received:
Project Code:
STC (yes/no & date):

Specify grant change request below (check all that apply):
 [ ] Request to increase grant amount by $\_\_\_\_\_\_\_\_\_\_\_\_\_
 [ ] Request to extend grant cycle beyond one year
 [ ] Request to change grant purpose/activities
 [ ] Other request (please specify):

Please explain your grant change request in detail: Click here to enter text.

Please explain why this change is necessary for the success of your project:Click here to enter text.

Anticipated completion date:Click here to enter text.

Project Executive Signature/Date:

Project Executive Signature/Date:

Project Advisor Signature/Date:

**FOR IN OFFICE USE ONLY**

Request for additional materials (circle) due: GCR Status (circle):
- Progress Report APPROVED/DENIED
- Line Item Budget/Grant Activity SCIF Coordinator Signature/Date:
-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date materials received: