

**PRIOR APPROVAL REQUEST FOR REVISION/ACTION ON SPONSORED PROJECT ACCOUNT**

This form may be used to request pre-award costs, budget revision or time extension.

Complete and forward to Office of Sponsored Projects Administration, 2nd floor Kinkead Hall 0057 257-9420

Principal Investigator \_\_\_\_\_ Account Number 4-\_\_\_\_\_

Approval is requested for:  Pre-Award Costs  Budget Change  Time Extension

*Request may require sponsor approval*

**Description of Request for Budget Change:** Indicate the dollar amount to be transferred and the applicable budget categories. For example, \$500 from salaries and wages to travel. Note: Changes to some direct categories will effect the indirect cost budget.

**Explanation and Justification:** Please provide an explanation of the need for the requested action in relation to the programmatic effectiveness of the project. If the action is a budget revision indicate why funds are available in the current budget and how the anticipated expenditure(s) will directly benefit the project. If the request is to rebudget into a cost which is normally indirect it must meet the requirements outlined in the University policy "Costing Guidelines for Sponsored Projects." All budget requests should be approved prior to expenditure.

**Certifications and Approvals:** This request is consistent with the scope and objectives of the project as approved by the granting agency. The request has been reviewed for scientific and technical relevance and availability of funds. If the requested action is for Pre-Award costs the chairperson must sign indicating the department will assume responsibility for expenditures incurred if the award is not received. If the request is to rebudget into costs which are normally indirect, Dean or Director concurrence is required. Approval is recommended by signature below:

Principal Investigator \_\_\_\_\_ Date \_\_\_\_\_

Chairperson or Director *Required for pre-award costs* \_\_\_\_\_ Date \_\_\_\_\_

Dean or Director *Required when requesting rebudget into normally indirect cost* \_\_\_\_\_ Date \_\_\_\_\_

**Office of Sponsored Projects Administration (OSPA)**

Research Administrator \_\_\_\_\_ Date \_\_\_\_\_