



# STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA

## SCHEV Grant-funded Projects Amendment Request Form

<b>Institution:</b>	<b>Requested By:</b>	<b>Date:</b>
<b>Grant/Project Name:</b>		

**Check all the boxes below that apply to this change request:**

- Changes to the scope of the project
- Changes to milestones and timelines that would jeopardize the completion of activities by the end date of the grant period
- Changes to key personnel named in the approved proposal
- Plans for continued progress during extended absence of lead personnel
- Changes to the budget resulting in a deviation of 20% or more in any budget category; the request must include the current allocation of resources along with specific detail and justification for the reallocation
- No-cost extension and requested extension (days and end date). The extension should be requested more than 30 days from the end of the grant period of performance on the MOU

<b>Description of Change:</b>
<b>Reason for Change:</b>

<b>Effect on Project Cost:</b>
<b>Effect on Deliverables:</b>
<b>Effect on Schedule:</b>
<b>Effect of NOT Approving this Change:</b>

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Date