



## **Maryland Higher Education Commission Budget and Project Amendment Request**

Grant recipients must obtain prior written approval to make any significant change to the approved project. This includes changes to the timeline, activities, key project staff and budget (> \$1,000 or 10% in the originally approved line item). An explanation of the specific change(s) and a revised budget must be provided. Please be specific when explaining all requested changes.

Requests to extend the approved project period should be made ***no less than one month*** prior to the originally established expiration date. Section C of this form must also be completed for requests to extend the project period.

<b>Organization:</b>	
<b>Project Title:</b>	
<b>Grant Number:</b>	<b>Project Director:</b>

### **Section A. Amendment Request Type**

<input type="checkbox"/> Project Extension	<input type="checkbox"/> Programmatic Changes
<input type="checkbox"/> Reallocate Funds	<input type="checkbox"/> Other

### **Section B. Amendment Request Explanation**

Description:

Reason:

Expected Results:

### **Section C. Project Extension: Additional Requirements**

For one time, no cost extensions, the following additional information must be included:

- Revised timeline of activities
- The role of key staff during the extension
- Estimated number of active participants during the extension period

**Maryland Higher Education Commission  
Grant Amendment Budget Summary**

For any requested budget changes, please provide a brief budget narrative for each line item.

	(A)	(B)	(A)-(B)
	Approved Budget	Revised Budget	Difference
A. Salaries & Wages Professional Personnel [List each by name followed by title in brackets]			
1.			
2.			
3.			
4.			
Other Personnel (list categories & # of each in brackets)			
5. [ ]			
6. [ ]			
Total Salaries and Wages			
B. Fringe Benefits			
C. Travel			
D. Equipment			
1.			
2.			
E. Materials and Supplies			
F. Consultant and Contractual Services			
G. Other (specify)			
1.			
2.			
H. Total Direct Costs (A through G)			
I. Total Indirect Costs (max. 8% of Column A, Item H)			
J. Total (H and I)			

**Project Director:** \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**Contact Information:** \_\_\_\_\_  
 E-mail \_\_\_\_\_ Telephone \_\_\_\_\_