

Grant Extension or Change Request Form

If the space available on this form is insufficient for your explanation, please contact Four Way and explain. Together we will agree on the best format for your request.

If you are unable to complete your project by June 1 of the year following a grant award, please explain and indicate how much time you anticipate needing to complete your project. If needed, attach additional information.

If you are requesting changes to the scope of work or allocation of budgeted expenses for a grant, please explain these as well as how these changes align with the overall mission and intent of the grant received.

Organization:		·	Date	_/	_/
Your name and title:					
Phone:	Email:				
Project Title:					
Amount awarded by Four Way:	Overa	all project bu	dget:		
If extension, expected new comple	etion date:				
Reason extension or change is nee	ded:				
For changes in scope of project or amended budget if needed):	budget allocation, ple	ase explain (attach or	rigina	l and

The Four Way Board meets monthly. Requests will be considered at the first meeting after they have been received. The board may request additional supporting documentation, budget information, or even a repeat site visit in evaluating this request. If a request for an extension or change is not approved by the Board, return of all or part granted funds may be required.