**Date of Request**:



**Lead Agency**:

**Project Title:**

**Grant Year**:

**Contact Name**:

**Email Address**:

**Budget Change Instructions**: Dollar amount rounded off to the nearest whole dollar.

**Grant Fund Budget:**

|  |  |  |
| --- | --- | --- |
| **Expenditure Type** | **Original Budget** | **New Budget** |
| 1000-Certificated Salaries | $ | $ |
| 2000-Classified Salaries | $ | $ |
| 3000-Employee Benefits | $ | $ |
| 4000-Books and Supplies | $ | $ |
| 5000-Services and other Expenditures | $ | $ |
| 6000-Capital Outlay | $ | $ |
| 7000-Indirect Costs | $ | $ |
| **Totals** | $ | $ |

**Provide a detailed explanation for budget changes**:

**Financial Match Budget:**

|  |  |  |
| --- | --- | --- |
| **Expenditure Type** | **Original Budget** | **New Budget** |
| 1000 – Certificated Salaries | $ | $ |
| 2000-Classified Salaries | $ | $ |
| 3000-Employee Benefits | $ | $ |
| 4000-Books and Supplies | $ | $ |
| 5000-Services and other Expenditures | $ | $ |
| 6000-Capital Outlay | $ | $ |
| 7000-Indirect Costs | $ | $ |
| **Totals** | $ | $ |

**Provide a detailed explanation for budget changes**:

**Amendment to Participation Agreement:**

Amendments are required for budget changes when there are changes in the total dollar amount of the Agreement and/or the outcome of the Agreement is materially affected.

* Did the total dollar amount of your agreement change?
* Will the outcome of the agreement be materially affected by the changed budget?

If you answered “Yes” to either of the questions above, an amendment to your participation agreement is required. If your response was “No” to both questions, an amendment is not required. However, if your institution requires an amendment to formalize the budget change, let us know.

**Submit for Review and Approval:**

Please return completed form to Sally Cox at sally.cox@gcccd.edu and Sue Fisher at sue.fisher@gcccd.edu