

Date \_\_\_\_\_

APPENDIX III

HAMPTON UNIVERSITY  
REQUEST TO REVISE A GRANT/CONTRACT

Sponsor \_\_\_\_\_

Project Title \_\_\_\_\_

Principal Investigator \_\_\_\_\_ Department \_\_\_\_\_

Agency Award No. \_\_\_\_\_ HU Account No. \_\_\_\_\_

**Complete all that apply**

<b>Change In PI/Director</b>	<b>Current</b> _____	<b>New</b> _____
<b>Change in Other Senior Personnel</b>	<b>Deletions</b> _____ _____	<b>Additions</b> _____ _____
<b>Change in Budget (Attach Copies of Original and Revised Budgets)</b>	<b>New Funds Requested?</b> Yes _____ No _____	<b>Changes in Indirect Cost or Release Time?</b> Yes _____ No _____
<b>Changes in Performance Period (Attach Statement of Work for New Period)</b>	<b>Current From</b> _____ <b>To</b> _____	<b>Requested From</b> _____ <b>To</b> _____

**Rationale for Change** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approval Recommended

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

\_\_\_\_\_ Department Chair/Supervisor

\_\_\_\_\_ School Dean/Budget Executive

\_\_\_\_\_ Asst. Provost for Technology\*

\_\_\_\_\_ Provost (or Vice President)

\_\_\_\_\_ V.P. for Research (or Representative)

\_\_\_\_\_ V.P. for Business Affairs (or Representative)

\*Signature required only if new funds or re-allocation of funds will be used to purchase technology.

TO BE COMPLETED BY GRANTS MANAGEMENT

AGENCY ACTION \_\_\_\_\_ DATE \_\_\_\_\_

Revised – 2/98