

EXTENSION REQUEST & REALLOCATION FORM

Project Title:

Name of Grantee:

Donor:

Grant Amount: US\$

Grant Period:

Grantee FY End:

Final Report Due Date:

Date of Request: _____

Extension Period (If relevant): _____

Reason for Extension/Re-allocation:

- If this is a re-allocation request, please attach the adjusted budget and explain.
- If this is an extension request with adjusted budget, please attach the updated budget and explain.