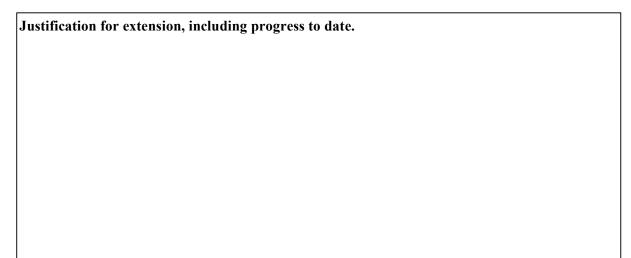# Request for No-Cost Extension

Instructions: *The PI should fill in the form fields and send as an attachment to the appropriate Sponsored Programs Administrator at least **30 days prior to the termination date of the grant**. Extensions cannot be processed without authorization from Sponsored Programs.*

Your name	**Date of request**
Department	**College/Div**
Phone	**E-mail**
Sponsoring Agency	
Agency Award Number	
Project Title	
Current End Date MM/DD/YYYY	
Requested End Date MM/DD/YYYY	
Grant Index Number	
SPO Number	
Has sponsor/funder approval been obtained? Yes No	

The following information must be provided.

Justification for extension, including progress to date.

Amount of unobligated balance and spending plan for it.

Assurance that all research compliance activities are approved and current.

Assurance	N/A or Approval Date
Human subjects	
Vertebrate animals	
rDNA/biohazardous materials	
Radioactive materials	
Controlled substances	

Budget Category	Current Budget	Rebudget Request
Salary and wages		
Fringe benefits		
Equipment		
Travel		
Supplies		
F&A		
Other		
Total		

Thank you for taking the time to complete this form.