

# LOS RIOS COMMUNITY COLLEGE DISTRICT GRANTS OFFICE

## GRANT AMENDMENT FORM

(Instructions provided on the opposite side of this form.)

### Grants Office Use Only

Date Received Amendment # \_\_\_\_:\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date Received Amendment # \_\_\_\_:\_\_\_\_/\_\_\_\_/\_\_\_\_  
 District File Number: \_\_\_\_ - \_\_\_\_

### PART I: GENERAL INFORMATION

Complete Part I. Use this form if you are requesting changes to an existing grant. This form may be used for two amendments for the same grant. If additional amendments are needed, use this form and indicate the number of the amendment on the form. Questions? Call the Grants Office, 568.3130.

College/Unit	<input type="checkbox"/> ARC <input type="checkbox"/> CRC <input type="checkbox"/> FLC <input type="checkbox"/> SCC <input type="checkbox"/> WEDC <input type="checkbox"/> DO	
Grant Program Name		
Project Title		
Project Director		Phone
Responsible Administrator		Phone
Funding Agency		Funding Agency Grant Number

PART II: FIRST GRANT AMENDMENT	PART III: SECOND GRANT AMENDMENT
Submission Deadline: _____	Submission Deadline: _____
<b>Requested Amendment Change (Check All That Apply):</b> <input type="checkbox"/> Budget Change (Attach Revised Budget)  <input type="checkbox"/> Performance Period Change (Indicate Date Change) Original Performance Period: _____ New Performance Period: _____  <input type="checkbox"/> Workplan Change (Attach Revised Workplan)  <input type="checkbox"/> Other (Please Describe & Attach Materials)	<b>Requested Amendment Change (Check All That Apply):</b> <input type="checkbox"/> Budget Change (Attach Revised Budget)  <input type="checkbox"/> Performance Period Change (Indicate Date Change) Original Performance Period: _____ New Performance Period: _____  <input type="checkbox"/> Workplan Change (Attach Revised Workplan)  <input type="checkbox"/> Other (Please Describe & Attach Materials)
Submit Amendment To: (Provide Contact Person & Address)	Submit Amendment To: (Provide Contact Person & Address)
Form of Delivery: <input type="checkbox"/> Mail <input type="checkbox"/> Hand-Delivery	Form of Delivery: <input type="checkbox"/> Mail <input type="checkbox"/> Hand-Delivery
Delivery of Amendment: <input type="checkbox"/> Grants Office Delivery Requested <input type="checkbox"/> College/Unit Will Pick Up & Deliver	Delivery of Amendment: <input type="checkbox"/> Grants Office Delivery Requested <input type="checkbox"/> College/Unit Will Pick Up & Deliver
Approval	Approval
College President _____ Date: _____	College President _____ Date: _____
Fiscal Services _____ Date: _____	Fiscal Services _____ Date: _____
Vice-Chancellor _____ Date: _____	Vice-Chancellor _____ Date: _____
(Fiscal Review Contact: _____)	
<b>Grants Office Use Only - Distribution</b> Funding Agency/Contact: _____ Date: _____ College/Unit Copy Sent To: _____ Date: _____ Fiscal Copy Sent To: _____ Date: _____  <b>Comments:</b>	<b>Grants Office Use Only - Distribution</b> Funding Agency/Contact: _____ Date: _____ College Copy Sent To: _____ Date: _____ Fiscal Copy Sent To: _____ Date: _____  <b>Comments:</b>



## INSTRUCTIONS FOR PREPARATION OF GRANT AMENDMENT FORM

### PART I: GENERAL INFORMATION

College/Unit	Indicate the name of the college/unit submitting the grant amendment. If the grant includes multiple colleges/units, indicate all that are involved.
Grant Program Name	Indicate the name of the program which funded the proposal. The name should be the same as that used on the Grant Submission & Acceptance Form. Example: Fund for Student Success (FSS)
Project Title	<b>Indicate the title given for the project at the time the proposal was submitted. The name should be the same as that used on the Grant Submission &amp; Acceptance Form.</b>
Project Director	Indicate the name of the person who is in charge of the project. This will likely be the same as the name that appeared on the Grant Submission & Acceptance Form.
Responsible Administrator	Indicate the name of the administrator responsible for overseeing the project.
Funding Agency	Indicate the name of the agency which funded the grant.
Funding Agency Grant Number	Indicate the grant number assigned by funding agency.

### PART II: FIRST GRANT AMENDMENT

Submission Deadline	Indicate the date the amendment request is due to the funding agency or must be postmarked.
Requested Amendment Change	Check all the amendment changes that apply to your project. Attach all requested materials. <b>NOTE: If the budget change you are requesting represents a shift of funds within the current budget and includes no additional funds, use this form. If the budget change includes additional funds, use the Grant Augmentation Form.</b>
Submit Amendment To	Indicate the contact person and address to which the amendment request is to be submitted.
Form of Delivery & Delivery of Augment	Indicate if amendment needs to be mailed, hand-delivered and the preferred entity responsible for mailing/delivery.
Approval	Approval for the amendment is required from the college and district levels. If a grant involves more than one college/unit, the lead college/center is responsible for obtaining signatures from all participating colleges/units.

### PART III: SECOND GRANT AMENDMENT

<p>This part is to be completed if there is a second amendment to the grant. If there are more than two amendments, submit a second Grant Amendment Form and note the number of the amendment on the form in Part II or III.</p>
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