NO COST EXTENSION REQUEST FORM

*A no cost extension extends the project period beyond the original project end date. "No cost" suggests that there is no additional funding. Please note that a no cost extension **<u>SHOULD NOT</u>** be requested or approved solely for the purpose of spending down residual funds. Use this form if there is a scientific need to extend the project beyond the original end date.*

INSTRUCTIONS: Complete the fields below, include any attachments, and click the "Submit" button or email to OPAM@memphis.edu, copying Grants@memphis.edu. The UOB will be verified, then this request will be routed to OSP.

NAME OF REQUESTOR:		DATE OF REQUEST:		*NOTE: The NCE must be sent to the sponsor <u>30 DAYS</u> before the end date if an initial request; else it is due <u>45 DAYS</u> before the end date and for NSF projects.*

PRINCIPAL INVESTIGATOR/PROJECT INFORMATION:

Principal Investigator (PI):		**Point of Contact:**	
Cayuse Project No.:		**Index-Fund No.:**	
Project Title:			
Sponsor:		**Sponsor Award ID:**	
Prime Sponsor:		**Prime Sponsor Award ID:**	

NO COST EXTENSION INFORMATION: **Request Type:**   **Initial** ☐   **Second** ☐   **Third or More** ☐

Use this section of the form to enter the required information to request the no cost extension.

PROJECT DATES:	**Original Dates:**			**NCE Dates:**	
Justification *(Describe why the project was not completed by the original end date)*:					
NCE Justification *(Describe plans to complete the work during the NCE including changes in SOW, if any, and describe how the remaining funds will be spent in the NCE)*:					
Unobligated Balance (UOB):	$	**As of Date:**		**Comment:** *(if any)*	
Rebudget for NCE?	YES ☐ NO ☐ *(If yes, use the internal budget spreadsheet and attach the NCE budget to this request.)*		**PI or Designee Signature:**		

OPAM and OSP USE ONLY:

Received by OPAM:		**UOB Verified:**	$	**As of Date:**	
Analysis Completed:		**Recommendation:**		**Send to OSP: Completed:**	Date: Initial:
Received by OSP:	Date: Initial:	**Submitted to Sponsor:**	Date: Initial:	**NCE Approved: NCE End Date:**	**Send to OSP Awards**
Received by OSP Award:	Date: Initial:	**NCE Entered in Cayuse:**	Date: Initial:	**NCE Award Notice Issued:**	**NCE FE?**