Nebraska Crime Commission Extension Request Form

See page three to view full instructions for completing this form.

See page tillee to view full i	111511111111111111111111111111111111111	completing this form.
GRANTEE/SUBGRANTEE:		GRANT NUMBER:
PROJECT TITLE/PROGRAM NAME:		PROJECT PERIOD FROM: TO:
PREPARED BY:		
DATE: PHONE:		
Please conduct a thorough analysis of your project to ensi equested.	ure that an ade	equate and realistic extension period is being
. CURRENT GRANT AWARD PERIOD:	FROM:	то:
. REQUESTED CHANGE OF GRANT AWARD PERIOD:	FROM:	TO:
E. EXPLANATION AND JUSTIFICATION OF THE NEED TO	CHANGE:	
Justification and the circumstances which require the pr	roposed extens	sion:
Explanation of the impact a denial of the request will hav	e on the projec	 ct or program:
	. ,	
Detailed description of the activities that will take place of	during the exte	nded project period:
. BUDGET:		
ORIGINAL AWARD AMOUNT: \$	CURRENT	UNSPENT BALANCE: \$
Explanation of unspent amount:		

	☐ No Budget Changes	s; Continuing						
	Current Project Period End Date:		PROJECT	Requested End Date:	Extension	1		
			BUDO	<u> </u> SET				
	Personnel:	\$						
	Fringe:	\$						
	Travel:	\$						
	Supplies:	\$						
	Consultants/Contracts:	\$						
	Client Assistance:	\$						
	Other:	\$						
	Total Direct Costs:	\$						
	Indirect Costs:	\$						
	Total Project Cost: erms and conditions of the ant Primary Point of Contact S		nt with any	approved m	odificatio	n s remain Date	in full fo	rce and effec
Gr	erms and conditions of the	e original gra	ved by NC			Date		
Gr ant	erms and conditions of the	e original gra Signature nust be recei curre	ved by NCo	C no later tha		Date		
Gr	erms and conditions of the ant Primary Point of Contact S Award Period Extension manual puest is: Approved Decrease in the anti-primary Point of Contact S	e original gra Signature nust be recei curre	ved by NCo	C no later tha ward Period.		Date		
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Gr rant	erms and conditions of the ant Primary Point of Contact S Award Period Extension manual puest is: Approved Decrease in the anti-primary Point of Contact S	e original gra Signature nust be recei curre	ved by NCo	C no later tha ward Period.		Date		

Based on current expenditures, how much is estimated to be available to complete the tasks and deliverables described

in the above timeline?

INSTRUCTIONS FOR COMPLETING EXTENSION REQUEST FORM

HEADING

<u>Grantee/Subgrantee:</u> This is the agency to which the grant award was made.

<u>Grant Number:</u> This is the grant number assigned to the project by NCC. It can be found on the Grant Award.

Project Title/Program Name: This is name of the project or program identified in the grant agreement.

<u>Project Period</u>: This is the period of the grant award. It can be found on the Grant Award. Fill in the From date and the To date.

Prepared By: This is the person completing this form. Include this person's 10-digit phone number.

Date: This is the date this form is completed.

1. <u>Current Grant Award Period:</u> If this is the first request for a grant period change, indicate the current grant award period which may be found on the Grant Award documents.

If the grantee has previously requested and received a grant period change, indicate the most recently approved grant award period.

2. <u>Requested Change of Grant Award Period:</u> Indicate your requested grant period change. End dates are usually the end of a calendar quarter.

You should request the actual amount of time needed to complete the project or program. Subgrantees can extend a grant's project period one-time for up to twelve (12) months, the maximum extension allowable for any project period. Its highly suggested grantees/subgrantees extended twelve (12) months but would recommend no less than six (6) months.

3. <u>Explanation and justification of the need to change:</u> Include a narrative answering the questions, explaining and justifying the need for a grant period change.

Complete details must be provided, including the justification and the circumstances which require the proposed extension. The justification cannot imply that the extension was driven by the desire to spend remaining funds or to pay for salaries. Explain why additional time beyond the established expiration date is required and how you will ensure adequate completion of the project/program activities. Include the project/program activities to be performed/completed during the extension period with the remaining funds with a detailed timeline. You must explain the effect a denial of the extension request will have on the project, program and/or community.

4. <u>Budget:</u> how much of the remaining funds are unobligated and why; and budget justification reflecting your proposed plans to use the remaining funds during the PPE.

The maximum extension allowable for any project period is generally 12 months.

Generally, requests for retroactive extension of project periods will not be considered.

Generally, only one extension per award will be permitted.

If a project is not operational within (60) days of the approved start date, the grantee/subgrantee must report in writing to NCC: (a) the steps taken to initiate the project; (b) the reasons for the delay, and (c) the projected start date.

If approved, NCC will issue an Amended Grant Award for an award period end change. The Amended Award must be executed (signed by the appropriate state and grantee officials as appropriate) prior to the end of the Grant Award Period.

Grant extensions are not encouraged or automatic. Extensions are governed by federal and state expiration dates and NCC discretion.