Nebraska Crime Commission Project Scope Change Request (PCR) Form

See last page for full instructions and details for completing this form.

GRANTEE/SUBGRA	ANTEE:		GRANT NUMBER:			
PROJECT TITLE/PROGRAM NAME:			PROJECT PERIOD			
			FROM:	T0:		
PREPARED BY:	PHONE:	DATE:				

Instructions: A project scope change is a program modification that changes the scope of programs and services currently funded. Answer the program and budget narrative questions below. The narrative should include not only what budget change is being requested, but how the request is necessary to meet the goals and outcomes of the program, and how is the request is reasonable and cost effective.

A budget amendment reallocating funding between existing budget line items or categories that do not change the scope of the project does not require this form.

Project Scope Change Narrative					
1. Why is the change necessary:					
Provide a description of the program or service by answering the following:					
a. Explain the purpose of the proposed project (including key activities or services):					
b. What are the current objective and goals of the project?					
c. What are the new objective and goals of the project?					
d. List the expected changes that the project will likely bring to your community:					
e. Explain how the project will measure success and if the community needs have been met:					
3. For each increased line in the budget below, describe how the request was previously funded and how it complies with the non-supplanting requirement:					

BUDGET AMENDMENT						
Category and Line-Item Title	New Line- Item Needs Added?	Current Line- Item Budget Amount (In Amplifund)	Rate	Revision Amount "+" & "-"	Final Line- Item Budget Amount (After Revision)	Justification Narrative
Example: Personnel: Youth Specialist	Yes	\$0	\$15/hr x 1040	\$15,600	\$15,600	Hiring a new part time youth specialist to accommodate increase in referrals
Example: Operating Expenses: Communication	-	\$1,000	\$50/mo	-\$,600	\$400	No longer needed for Truancy Coordinator
Example: Personnel: Truancy Coordinator	-	\$20,000	\$15/hr	-\$15,000	\$5,000	Vacancy in this position and it was eliminated due to decrease in referrals.
	Choose					
	an item.					
	Choose					
	an item.					
	Choose					
	an item.					
	Choose					
	an item.					
	Choose					
	an item.					
	Choose					
	an item.					
TOTAL \$ \$ \$						
Add Rows as Necessary Revision Amount must total \$0; Current Line-Item Budget Amount and Final Line-Item Budget Amount need to be the same.						

For Community-based Juvenile Services Aid and Juvenile Services Commission Grant Program Only

For Community-based Juvenile Services Aid and Juvenile Services Commission Grant Program Only						
PROGRAM TYPE TABLE: Date Updated:						
Program Title	Over-arching Type	Program Type	Sub-program Type	Current Amount	Requested Change	
				\$	\$	
				\$	\$	
				\$	\$	
				\$	\$	
				\$	\$	
				\$	\$	
All programs listed in the table above must equal the total award budget: TOTAL					\$	
Add Rows as Necessary						

All other terms and conditions of the original grant with any a of this form, other than the data entry required, has not been a	approved modifications thereto remain in full force and effect. I, hereby certify that the content altered.
X	
Project Contact or Financial Contact	
This Request is: □ Approved □ Denied	**NCC Use Only***
Reason for Denial:	
<u>X</u>	
NCC Signature	

DETAILED INSTRUCTIONS FOR COMPLETING PROJECT CHANGE REQUEST FORM

A GRANT MODIFICATION IS NOT AUTHOIZED UNTIL IT IS APPROVED IN WRITING BY THE CRIME COMMISSION.

The subgrantee must submit a Project Change Request (PCR) when there is a need to alter the scope of programs and services funded in the approved grant application. All project change requests need to be approved <u>prior</u> to any change taking place. Requests for reimbursement will not be allowed for any expenses incurred prior to the approval from NCC. To request a project change, submit a Project Change Request Form to your Grant Manager.

PROJECT CHANGE NARRATIVE: Justifications must be included so it is clear why budget changes are necessary. Justifications help determine if budget amendments are appropriate and if the changes will impact the approved scope of work. Answer all questions in the narrative.

BUDGET AMENDMENT: If the change in scope of work also changes the budget, fill out the budget amendment table. If there are expenses to existing line items or new line items being added, there must also be line items with deductions. Add both to the table, adding additional rows as needed. Only include in the table line items being changed. **Revision Amount must total \$0**; **Current Line-Item Budget Amount and Final Line-Item Budget Amount need to be the same.**

PROGRAM TYPE TABLE: This table is for Community-based Juvenile Services Aid and Juvenile Services Commission Grant Program Only.

Signature: The Project Change Request Form must be signed by either the Project Point of Contact or the Financial Point of Contact.

Definitions:

- **Project Change Request (PCR):** A PCR is the form used when there is a scope of work change.
- **Scope of Work Change:** Scope of work changes are a significant modification the programmatic goals, objectives, staffing and activities. New program narrative statements must be developed describing changes in any of the following areas:

Target population
Service Area
Collaborative activities
Performance measures

Project goals
Objectives
Service Area

Project activities

- **Budget Amendment:** A budget amendment is when you are changing allocation amounts of line items in the approved budget, and those changes may not affect the scope of work. The revisions to the budget will show which line item the funds are going to, and which line items the funds are coming from. Budget Amendments are completed in Amplifund. PCRs with a budget amendment will also submit the Budget Amendment in Amplifund after the PCR is approved.
- **Budget Amendment Request (Less Than 10% of Total Award):** If the total budget change amount is less than 10% of the total grant award, no prior approval is needed before submitting a payment. Payments will not be rejected due to the an overage in a line item; however, a budget amendment request will need to be completed in AmpliFund before the overage exceeds the 10% threshold or the close of the grant, whichever occurs first.
- **Budget Amendment Request (More Than 10% of Total Award):** The subgrantee must complete a budget amendment in AmpliFund before payment can be made if the change is over 10% of the total awarded amount. Budget revision justifications must be included so it is clear why budget changes are necessary. Justifications help determine if budget amendments are appropriate and if the changes will impact on the approved scope of work. It is possible a budget amendment will also require modification to the scope of work (PCR). They are necessary for audit purposes.
- *A budget amendment does not increase the amount of the total approved budget; it simply moves money from one budget line item to another.
- *If the grant manager needs additional information to process the request, they will follow up by either contacting the subgrantee or sending the request back in AmpliFund to the subgrantee with remarks attached.
- *Please note the Project Change Request and/or Budget Amendment Request can be denied if the requested position, activities, or costs are not allowable or reasonable. The grantee should submit a Project Change Request and/or Budget Amendment (over 10% of total award) and await approval prior to hiring staff or incurring any expenses associated with the change. Failure to do so may result in an expense not being reimbursed.
- *Prior approval means before it happens. Unfortunately, subrecipients are not always aware of changes that need to be made until the changes need to be made. It is important to review budgets, staffing, goals and objectives frequently and anticipate changes which will require a scope of work change.
- *Not all budget amendments require a project change request; likewise, not all project change requests will require a budget amendment. Contact your Grant Manager to discuss the request and what is required prior to submitting this PCR form.