Nebraska Crime Commission

Justice & Youth Programs Division

Grant-Funded Personnel Change Form

Subgrantee Name:_____ **Grant Number**:_____

This form must be completed when a personnel change occurs in a position **supported by NCC grant funds** or **designated as matching funds**. Submit it with your payment request and supporting paperwork for the relevant period, following the guidelines in the OAT letter.

POSITION	Previous Employee	Separation date	Current Employee	Hire Date

PPOC or FPOC Name:_____

PPOC or FPOC Signature: _____ Date:_____