

Technical Assistance (TA) Funding Program Request for Time Extension

Project Director (PD) completes 1-9.

1. DATE SUBMITTED:
2. TA PROVIDER (GRANTEE) NAME:
3. AGREEMENT NO.
4. TIME EXTENSION PERIOD REQUESTED:
 - a. ELIGIBLE START DATE:
 - b. WORK COMPLETION DATE: INITIAL REVISED
5. AMOUNT OF GRANT FUNDS THAT WILL BE EXPENDED BY:
 - a. INITIAL WORK COMPLETION DATE \$:
 - b. REVISED WORK COMPLETION DATE \$:
6. IS PROJECT CONSISTENT WITH THE ORIGINAL SCOPE OF WORK AND PURPOSE OF THE APPROPRIATION?
 YES NO PLEASE EXPLAIN:
7. EXPLAIN CIRCUMSTANCES THAT RESULTED IN INABILITY TO COMPLETE PROJECT ON SCHEDULE AND/OR ANY IMPEDIMENTS TO COMPLETION:
8. EXPLAIN MEASURES THAT WILL BE TAKEN TO ENSURE PROJECT COMPLETION:
9. AS PD, I HEREBY CERTIFY THAT THE PROJECT IS CONSISTENT WITH THE ORIGINAL SCOPE AND PURPOSE AND WILL BE COMPLETED WITHIN THE REQUIRED PERIOD OF LIQUIDATION.

PROJECT DIRECTOR'S NAME:

SIGNATURE

DATE

Division of Financial Assistance Review (10-14)

10. GRANT MANAGER (GM)
 APPROVE DENY IF DENIED, PLEASE PROVIDE A REASON:

GRANT MANAGER'S NAME:

SIGNATURE

DATE

11. PROGRAM ANALYST

CONCURS DISAGREES PLEASE PROVIDE A REASON:

PROGRAM ANALYST'S NAME:

SIGNATURE

DATE

APPROPRIATION END DATE:

REQUEST EXTENDS BEYOND END DATE: YES NO

FUNDING INFO/PCA NUMBER:

\$ AMOUNT TO BE INCURRED/ENCUMBERED FOR TIME EXTENSION

GRANT AWARD \$:

EXPENDED \$:

BALANCE \$:

THROUGH

12. PROGRAM ANALYST'S SENIOR

CONCURS DISAGREES PLEASE PROVIDE A REASON:

PROGRAM ANALYST SENIOR'S NAME:

SIGNATURE

DATE

13. DFA FISCAL UNIT

FUNDING AVAILABLE? YES NO

FISCAL STAFF'S NAME:

SIGNATURE

DATE

14. DFA SECTION MANAGER

APPROVES DENIES

DFA SECTION MANAGER'S NAME:

SIGNATURE

DATE

See the next page for instructions on completing the form.

Time Extension Form Instructions

PD completes the form and submits to the GM. The PD must justify why a time extension is needed and explain the specific measures that will be taken to ensure project completion by the proposed extension date. The request must be submitted no later than 90-days prior to the end of the Agreement period.

1. Enter date form was submitted to GM.
2. Enter Grantee Name.
3. Enter Agreement Number.
4. Enter the eligible start date and work completion date from the current Agreement.
5. Enter the amount of current grant funds that will be expended (invoiced) by the work completion date from the current Agreement, and the proposed work completion date should the time extension be approved.
6. Check box. If "No" is checked, explain how the project differs from the original scope of work and/or purpose of the appropriation?
7. Explain mitigating circumstances that caused the delay in project completion, and/or impediments to project completion that justify a time extension.
8. Explain measures that will be taken to ensure project completion.
9. PD signs and dates the form. Mail completed form to the GM.
10. GM will review the request and either approve or deny.