

Graduate School and Research Internal Research Grants Program
Killgore Faculty Research Grant
President's Undergraduate Student Research Program &
Graduate Student Research Program

Budget Change Request Form

Name (Print): _____ Phone: _____

Email: _____

Title of Project:

Take as much space as needed to provide complete answers to the questions below.

1. What changes do you wish to make to your approved budget?

2. Why are these changes necessary?

3. Please explain how the budget change request relates directly to your current proposal.

4. Will this request change the scope of work, compliance, administration, instrumentation, and or method? If so, how?

5. Might this change in the budget also change the anticipated results of the project? If so, explain.