



SUBAWARD MODIFICATION REQUEST FORM

To modify an existing subaward or add the next increment of funding from Rutgers to another institution, organization, or business, complete the required information below. Please email the completed form to subawards@research.rutgers.edu

A. SUBAWARD INFORMATION

Principal Investigator Name:

Subrecipient Name:

Subaward ID:

Modification Number:

**Project Account Information: First \$25,000
(Enter N/A if Previously Applied)**

**Project Account Information: Above the First
\$25,000 of the Subaward**

Project ID:

Project ID:

Task:

Task:

Expenditure Type:

Expenditure Type:

Expenditure
Organization UDO:

Expenditure
Organization UDO:

Location:

Location:

Business Line:

Business Line:

Amount:

Amount:

Reserved for future use



SUBAWARD MODIFICATION REQUEST FORM

B. MODIFICATIONS REQUESTED

Check and complete all that apply. If you select Scope of Work Change, Budget Change, or Subrecipient PD/PI or Senior/Key Person Change, provide an explanation in the “Comments” section.

Project Date Change / No Cost Extension:	Start Date:	Rutgers PD/PI Change:
	End Date:	Scope of Work Change:
Termination:	Date:	Budget Change:
Funding Increase:	Amount:	Subrecipient PD/PI or Senior Key Person Change:
Carryover:	Amount:	
Funding Decrease:	Amount:	

C. SUBRECIPIENT MONITORING

If the answer to any of the below questions is No, please provide a brief explanation in the “Comments” section.

Did the subrecipient complete all work during the previous period of performance in accordance with the scope of work and the agreement’s terms and conditions?	Yes:	No:	
Did the subrecipient submit and complete all required technical reports on time?	Yes:	No:	N/A:
Did the subrecipient submit timely and properly certified invoices?	Yes:	No:	N/A:
Did the Rutgers Principal Investigator conduct any on-site visits to the subrecipient?	Yes:	No:	N/A:

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D. COMPLIANCE

Were there any changes related to the following during the previous period OR has the currently used protocol ended? If the answer is “Yes”, please explain briefly in the “Comments” section and include a copy of the IRB or IACUC current approval.

Will human subjects be involved going forward at the subrecipient institution? (Contact the IRB at 848-932-4018 with any questions.)

Yes:

No:

Will animal research be conducted going forward at the subrecipient institution? (Contact the IACUC at 818-932-4012 with any questions.)

Yes:

No:

E. COMMENTS

F. SIGNATURE

Signature:

Signatory's Name:

Date Signed: