**REQUEST FOR A GRANT VARIATION**

This form is required to be completed if a funding recipient wishes to vary the terms of their funding agreement. Such variations can take the form of, but are not limited to: altering the specifics of what the budget will be expended on; the time frame over which the funds will be expended i.e. a grant extension; the location at which the research project will be undertaken; a change in administering institution.

All named principal and co-investigators on the grant must approve the application for a variation

***Please note, increases in funds provided to specific grants will not be considered.***

|  |  |  |
| --- | --- | --- |
| **1** | Project title |  |
| **2** | Principal Investigator (PI) |  |
| **3** | Names and institutions of  Co-Investigators  Note: Associate Investigators should not be listed |  |
| **4** | Email address of PI |  |
| **5** | Mobile phone number of PI |  |
| **6** | Institution administering the grant |  |
| **7** | Name and email address of research grant post award administrator |  |

**APPLICATION DETAILS**

**Type of variation (more than one option can be selected)**

**☐ Extension of grant duration (extend reporting/acquittal timelines)**

**☐ Change in budget allocation (changes in what the funding will be spent on)**

**☐ Change in administering institution**

**☐ Change in location where research will be carried out**

**☐ Other (please detail below)**

1. **Please explain the reason for the grant variation request and the nature of the variation (max 200 words);**
2. **Please explain how the original aims and outcomes will still be achieved (max 200 words);**

* **Any significant change to the aims or outcomes of the project will need to be discussed with the Executive Director, Research**

1. **If a grant extension is requested, please provide a revised timeline;**

**Approvals (add additional Co-investigators as required)**

Principal Investigator

Name;

Date;

Signature;

Co- Investigator

Name;

Date;

Signature;