



**GRANT MODIFICATION
REQUEST FORM**

The Cleveland Foundation and its Supporting Organizations

Complete the appropriate section(s) of this form to request the following changes to a grant: *grant period extension or budget realignment/reallocation*. Email this form to grantsmgmt@clevelandfdn.org. Please allow up to 5 business days for a response.

ORGANIZATION

GRANT ID NUMBER

GRANT AMOUNT

VERIFICATION

If you are not the Executive Director/President, you certify they have reviewed/approved this request for modification.

Name

Phone

Date

* * * * *

EXTENSION OF GRANT PERIOD

Current grant end-date

New end-date requested

Current balance of unspent grant funds:

Reason for extending the grant period

Briefly describe the circumstances necessitating an extension

REALLOCATION OF REMAINING GRANT FUNDS

Current balance of unspent grant funds:

Complete the line items below by entering the awarded amounts (if a budget was provided with your award letter) and the change you are requesting. Click outside the table to exit.

PROJECT EXPENSES	Foundation Award	Requested changes
Salaries and wages		
Consultants and professional services		
Travel		
Equipment		
Office Supplies/Materials		
Postage and mailing		
Rent/Occupancy		
Indirect expenses ie: rent/occupancy, utilities, maintenance		
Other		
TOTAL		

Briefly describe the new use of funds and the reason for reallocating.

For any questions, contact Grants Management at 216-615-7254 or grantsmgmt@clevefdn.org