

## **No-Cost Extension (NCE) Request**

This form must be submitted via Huron Grants using the Award Modification Request (AMR) feature.

Project/Account Number:	Sponsor:
Principal Investigator:	Business Unit:
Huron Award Number:	Research Administrator:
Prepared By:	Date of Request:

<b>Sponsor Reference #:</b>	<b>Sponsor Contact Name:</b>	
<b>Current End Date:</b>	<b>Requested End Date:</b>	
Original Award Amount:	<b>Current Remaining Balance:</b>	

Is this NCE request the first for this project?

If not, how many previous NCE periods has the project received?

Provide a detailed programmatic justification for the NCE that clearly focuses on adequate completion of the original scope of work within the funds already made available. (Use an additional sheet if necessary.)

## **CERTIFICATION**

Principal Investigator and Research Administrator certify to the best of their knowledge that the no-cost extension request is consistent with sponsor and university policies.

Principal Investigator Signature

Research Administrator (when applicable)

Internal Office of Research Use Only		
Date of Review:		
Reviewer:		
Status of Request:		
Date of Submission to Sponsor:		
Internal Extension Pending Status:		
Date of Last Action:		
Notes:		