

Umoja Program Funds Grant Amendment Request Form

Grantee Information						
Name of Institution:						
Institution Address:						
Project Contact:	Street/PO Box.		Zip			
Name		Email	Phone			
Requestor of Amendment:	Program Coordinator Name	 Program Coordinator Signa	ture			
	Trogram Coordinator Name	1 Togram Coordinator Signa	ture			
	Grant In	formation				
Project or Program Name: Date Grant(s) was Awarded:						
Grant Performance Period:		Grant Award(s) Amou	ınt:			
Amendment Information						
Describe the grant amendment you are requesting, including specific budget projections (attach workplan and budget detail):						
Please explain why the grant amendment is necessary (provide supporting documentation):						



Grant Amendment Request Submission

A Grant Amendment Request Form is required for all grant amendment request and request must be submitted to the Umoja Central Office for review and approval. All amendment request must be sent electronically to the Central Office Operations Director via designated Regional Coordinator. Incomplete forms will not be reviewed/considered. Please allow up to 2 weeks from date of submission for complete review and decision from the Central Office.

Submission of a Grant Amendment Request Form is not an implied guarantee of any kind.

RFA: Umoja Program Funds Reporting

Should Umoja approve a grant amendment request, the grantee is still expected and required to abide by the original grant-reporting protocol and schedule. Umoja reserves the right to revoke a grant award and/or deny future request for funding or grant amendment request if Umoja does not receive reporting.

TO BE COMPLETED BY UMOJA OFFICE						
Amendment .	Approved: □ Yes □ No					
Approved By	: Name	Title	Signature	 Date		
Comments/N	lotes:					