

DCJ FORM 4-D - MODIFICATION OF OTHER GRANT AGREEMENTS

SUBGRANTEE:	GRANT NUMBER:
PROJECT TITLE:	PROJECT DURATION: From: _____ To: _____
PREPARED BY:	PHONE: () DATE:

This **MODIFICATION OF OTHER GRANT AGREEMENTS** form is **limited only** to *addition or deletion of goals/objectives or Special Conditions* for the above-referenced grant number. Please note that major deviation from the original goals and objectives (scope of work) approved for this project may require issuance of a new Statement of Grant Award.

A Grant Modification is not authorized until it is approved in writing by the Division of Criminal Justice.

To request approval for change, submit two signed forms, one with **original** signature. One approved copy will be returned for your records. *See reverse side for full instructions.*

A. The purpose of this request is to: *(please mark one selection)*

Add, Modify, or Delete **Goal(s) and Objective(s)**

Add, Modify, or Delete **Special Conditions**

B. Description of modification, including explanation and justification of the need to change: *(Continue on plain bond paper as necessary.)*

All other terms and conditions of the original grant with any approved modifications remain in full force and effect. I, hereby certify that the content of this form, other than the data entry required, has not been altered.

PROJECT DIRECTOR Signature

DATE

Division of Criminal Justice Use Only

This request is: **Approved** **Denied** *(see attached)*

PROGRAM SPECIALIST, DCJ	DATE
DIRECTOR, DCJ	DATE
STATE CONTROLLER DESIGNEE	DATE

DETAILED INSTRUCTIONS FOR COMPLETING
DCJ FORM 4-D - MODIFICATION OF OTHER GRANT AGREEMENTS

HEADING

Subgrantee: This is the agency to which the grant award was made.

Grant Number: This is the grant number assigned to the project by DCJ. It can be found on the Statement of Grant Award.

Project Title: This is the name of the project which is identified on the grant application.

Duration: This is the period of the grant award. It can be found on the Statement of Grant Award, and is changed only if the project requests and receives a grant extension.

Prepared by: Name of person completing this form. Include this person's phone number.

Date: This is the date the Modification of Other Grant Agreements form is completed.

- A. **Requested Modification:** Indicate the purpose of the modification by checking the proper line. Normally, subgrantees will only initiate a modification of goals and objectives. DCJ will normally initiate other modifications.
- B. **Modification Description:** State whether you are adding, modifying or deleting, and describe fully and justify the modification as specifically as possible. Include the goal and objective number(s) being changed. It is preferred that you write the goal/objective as it was originally stated and then indicate the change. Attach additional sheets as necessary.

Please note that major deviation from the original goals and objectives (scope of work) approved for this project may require issuance of a new Statement of Grant Award (SOGA).

Send two signed forms, one with original signature to DCJ. One approved copy will be returned for your records.