



**21ST CENTURY COMMUNITY LEARNING CENTERS
REQUEST FOR BUDGET CHANGE**

DATE: _____
 GRANTEE: _____
 PROJECT NAME: _____
 BUDGET PERIOD: _____
 EFFECTIVE DATE: _____

EXPENDITURE CATEGORY	PRESENT BUDGET (SHOW ALL ENTRIES WITH WHOLE DOLLAR AMOUNTS ONLY.)	REQUESTED INCREASE OR (DECREASE) (SHOW ALL ENTRIES WITH WHOLE DOLLAR AMOUNTS ONLY.)	NEW BUDGET (SHOW ALL ENTRIES WITH WHOLE DOLLAR AMOUNTS ONLY.)
1. PERSONNEL	\$	\$	\$
2. FRINGE BENEFITS	\$	\$	\$
3. TRAVEL	\$	\$	\$
4. EQUIPMENT	\$	\$	\$
5. SUPPLIES	\$	\$	\$
6. CONTRACTUAL	\$	\$	\$
7. TRANSPORTATION COST FOR STUDENTS	\$	\$	\$
8. OTHER	\$	\$	\$
9. TOTAL DIRECT COSTS (LINES 1-8)	\$	\$	\$
10. INDIRECT COSTS	\$	\$	\$
11. PROFESSIONAL DEVELOPMENT	\$	\$	\$
12. TOTAL COSTS (Lines 9 – 11)	\$	\$	\$

Submit original form, completed in ink or typed, with dates shown next to signatures. Copies, facsimiles, or forms with mission signatures or dates will NOT be processed. Changes must be received and approved at least 30 days prior to the expiration of the grant. Changes are in effect only after final signature by IDOE.

ATTACH WRITTEN JUSTIFICATION WITH DETAILS OF ALL CHANGES.

Requested by:

Approved by:

 Program Representative of Grantee Date

 21ST CCLC Administrator Date

 Fiscal Representative of Grantee Date