

Subaward Modification Request Checklist

MIT Information

Subaward ID: _____ PO # _____

MIT PI Name _____

MIT Admin Contact Name _____

Subrecipient Institution Information

Sub PI Name _____ Email _____

Administrative Contact Name _____ Email _____

Type of Subaward Modification Requested

- No cost extension
- Additional funding & extension to period of performance
- Additional funding only
- Other: _____
(examples: new PI, termination, updated budget/SOW, funding reduction, carryforward, deobligation)

Period of Performance Information

New Obligation End Date: _____ (if changing)

Current Subaward Obligation/Period of Performance: Start Date _____ End date _____

Updated Subaward Obligation/Period of Performance (after extension): Start Date _____ End Date _____

Full, **Anticipated** Subaward Period of Performance Dates: Start Date _____ End Date _____

Funding Information*

Change in Funding Amount: \$ _____

Current Total Subaward Obligation amount: _____

New Total Subaward Obligation amount: _____

Anticipated Total Subaward Amount: _____

Cost Share: Current Total: _____ Change in Cost Share _____ Updated Cost Share Total _____

*** Subaward Total is not always the same as PO value, e.g., if there are multiple POs for the Subaward.**

Other Changes/Comments:

Attach to PO if Applicable:

- Updated Sub-specific budget (if budget on file no longer matches obligation totals)
- Updated Sub-specific SOW (if changed/additional scope)
- IRB protocol update (if applicable)
- Other