UTSA RESEARCH

REQUEST FOR NO-COST EXTENSION FORM Instructions: Complete this form to request approval for a no-cost extension for a grant. A no-cost extension provides the Principal Investigator (PI) with additional time to complete the scope and objectives of the sponsored program without additional funds being provided by the funding agency. Requests may not be made for the sole purpose of spending remaining funds. Please complete all of the fields and submit this form to the Post Award Administration office (postaward@utsa.edu) at least twenty (20) days prior to the termination date or end date of the grant award. Please be aware that some agencies may require additional time to process no cost extensions. Principal Investigator: ___ Department: Award ID #: College: Project ID #: Original Expiration Date: Requested Expiration Date: Anticipated Project ID Balance: _ (at current expiration date) Justification for No-Cost Extension (The fact that funds remain at the expiration of the project is not a sufficient justification): Should Post Award Administration extend the termination dates of all subcontracts on the project? ☐ Yes ☐ No Will the effort of any key personnel be reduced during this extension period? ☐ Yes ☐ No If YES, please identify those whose effort will be reduced and their proposed new level of effort. Please note that a reduction of 25% or more of the proposed effort of key personnel will require prior approval from the Sponsor. ☐ Yes ☐ No Will there be a change in the Scope of Work? Scope of Work for No-Cost Extension (Provide a description of work to be completed during the No-Cost Extension period of performance noting any changes to the original scope of work): Plan for use of remaining funds during the extension time period (attach a budget and budget narrative): Form SPA-8 Other relevant information:

PLEASE NOTE:

- All non-financial compliance issues must be resolved for this proposed, of cost extension time period. The Principal Investigator should contact the appropriate institutional committee(s) in the Office of Research Integrity (ORI) for extension approvals.
- Sponsor guidelines will need to be reviewed by the Post Award Administrator reviewing this no cost extension request in order to determine the type of action that is needed. The Principal Investigator will be contacted if additional information is needed.

CERTIFICATIONS AND APPROVALS			
☐ I request a no-cost extension based on the above information.			
Pri	incipal Investigator	Date	
☐ Approved ☐ Not Approved			
Po	st Award Administration Director	Date	