

## Committee on Research and Publications (CRP)

## **Internal Grant Extension Request Form**

Requests may be submitted up to **60 days** prior to the grant's current end date and no later than **30 days** after receipt of the grant expiration notice, otherwise, the account will be automatically closed and funding will be returned to the source. Submit the form to: research@MSVU.ca

This form is used for internal grants only. Please check the box that applies to your request:

SSHRC Exchange Grant	SSHRC Explore Grant
Standard Grant	Book Launch
Aid to Scholarly Publications & Communications	Other (specify)

Part A: To be completed by the Applicant					
Applicant's Surname		Applicant's First Name			
Faculty		Department			
Title of Project (if applicable)					
Grant Number	Current End Date		Current Balance		
Please provide an explanation of why you have been unable to use the funds by the original award end date.					

Please provide a brief budget breakdown of how you will plan to use the remaining funds.					
			ed End Date 1 year from)		
according the original program terms.					
Part B: To be signed by the Ap	pplicant				
I verify that all the information contained within this application is true and complete, to the best of my knowledge.					
Applicant's Name	Applicant's Sig	gnature	Date		
Don't Or To be completed by A)	(DD				
Account Balance Confir	Part C: To be completed by AVPR Account Balance Confirmed		on Denied		
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Extension		_			
New End Date:					
Name	Signature		Date		