



## Utah Commission on Criminal and Juvenile Justice

101 State Capitol  
Salt Lake City, Utah 84114  
(801) 538-1031  
Fax: (801) 538-1024

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### GRANT CHANGE REQUEST FORM INSTRUCTIONS

This form was developed in WordPerfect 6.0 and Microsoft Word tables format to eliminate the need to manually type grant change requests. To use this file you must have Microsoft Word or WordPerfect for Windows version 6.0 or higher.

**Important Note:** Before using this form in Word Perfect, please make sure the table calculation function is turned "on" in your computer. To do this click your mouse on the following WordPerfect commands at the top of your screen:

1. Table
2. Calculate
3. Calculate tables in document
4. OK

This form has built-in formulas in the budget summary section that calculate totals in columns and rows. You need only enter current and requested budget amounts. To prevent accidental damage to formulas and ease the entering of information, all cells of the document have been protected except those that require data entry. You may use the tab key to move between cells.

#### COMPLETING THE GRANT CHANGE REQUEST FORM

- A) Access the Grant Change Request Form by logging into the CCJJ web site ([www.justice.utah.gov](http://www.justice.utah.gov)). Scroll down the page to the "Grants" section and click on Grant Forms. Select the Grant Change Form that is compatible with your operating software and download it to your computer.
- B) Fill in the following information (information in parentheses corresponds to the inclosed sample):
  1. Enter your grant number (1D65).  
Enter the name of your grant program (Boot Camp for Drug Offenders).
  3. Enter grantee information (Department of Corrections).  
Enter your address (50 South Center St. Provo, UT 84444).  
Enter phone and fax numbers (435-555-7777 & 435-555-7788).
  4. Complete block #4 "Nature of Adjustment" by placing an "X" in the boxes next to those applicable to your grant change and add explanation as necessary.
    - a) If you need additional time, select "**Extension to**" and enter the date to extend the grant period to.  
(X - Extension to: - September 30, 2002)
    - b) If you have surplus money in one category and need more money in another category, select "**Budget Adjustment**" and reflect your new budget numbers in the budget summary section.  
(X - Budget Adjustment)
    - c) Choose "**Other**" for travel/training documentation, changes in grant program purposes, administration or personnel, requesting additional funds, etc.  
(X - Other: - Training conference)

5. Enter "Adjustment Number" (2 meaning this is the second grant change request submitted)
6. Complete the "Budget Summary" section only if you are requesting funds be transferred from one category to another; otherwise leave it blank. *Be sure to reflect the entire grant award amount in each of the categories throughout this section.*

When completing this section you are *required to fill in all of the reporting categories (e.g. Personnel, Contracts, Equipment, etc)*, not just those you are changing, in the following four columns:

- |                        |  |
|------------------------|--|
| 1. Grant Funds Request | This represents the new amount of Federal grant funds for each given category.<br>(\$73,000 in personnel, \$5,000 in contracts etc.)   |
| 2. Grant Funds Current | This represents the Federal funds in your grant budget as it stands now.<br>(\$75,000 in personnel, \$7,500 in contracts etc.)   |
| 3. Cash Match Request  | This represents the new amount of cash match for each given category.<br>(\$25,000 in personnel)   |
| 4. Cash Match Current  | This represents the cash match funds in your grant budget as it stands now.<br>(\$25,000 in personnel)<br><i>NOTE: Even though the cash match budget amounts do not change you must still include them in the summary section for accurate calculations.</i> |

7. *Microsoft Word Users:* You will need make your summations manually. In each category, add together the Current Match Funds and Current Grant Funds and place the sum in the Current Total Costs column. Do the same in each of the New Match Funds and New Grant Funds columns in each category. Finally, add the Total Costs columns to arrive at the dollar amount of your full grant award.
8. "Justification": In this space provide a detailed explanation of why the grant change request should be approved. Use as much space as necessary in this section to support your case. As you type, the box will expand to accommodate your explanation. If required, the signature boxes on the bottom of the form will move onto the second page.

- C) Once completed you may print the form just as you would any other document.
- D) Please make sure the form is signed by the appropriate agency representative before submitting it to CCJJ for approval. Your request has been approved when you receive a copy of the form with a CCJJ approval signature.  
*If you requested a budget adjustment, be sure to provide documentation of the change to your financial personnel so their records and future Financial Status Reports will reflect the new budget.*
- E) Technical questions about the functioning/completion of this spreadsheet should be addressed to:  
Doreen Weyland, Grants Specialist  
101 State Capitol  
Salt Lake City, Utah 84114  
(801) 538-1372  
[dweyland@utah.gov](mailto:dweyland@utah.gov)

# G R A N T   C H A N G E   R E Q U E S T



**STATE OF UTAH**  
**Commission on Criminal and Juvenile Justice**  
 101 State Capitol  
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 (801) 538-1031 Fax: (801) 538-1024

1. Grant #: 1D65  
 Name: Boot Camp for Drug Offenders  
 2. Grant Program: **Byrne Law Enforcement**

3. Grantee: Department of Corrections  
 Address: 50 South Center St. Provo, UT 84444  
 Phone #: 435-555-7777 Fax: 435-555-7788  
 4. Nature of Adjustment  
 Extension to: September 30, 2002  
 Budget Adjustment  
 5. Adjustment Number: 2  Other: Training Conference

**6. Budget Summary**

Item	Total Costs		Grant Funds		Cash Match	
	New	Current	New	Current	New	Current
Personnel	98,000.00	100,000.00	73,000.00	75,000.00	25,000.00	25,000.00
Contracts	5,000.00	7,500.00	5,000.00	7,500.00	0.00	0.00
Equipment	15,000.00	15,000.00	15,000.00	15,000.00	0.00	0.00
Travel	2,000.00	0.00	2,000.00	0.00	0.00	0.00
Supplies	5,000.00	2,500.00	5,000.00	2,500.00	0.00	0.00
Other	0.00	0.00	0.00	0.00	0.00	0.00
<b>Total Costs:</b>	<b>125,000.00</b>	<b>125,000.00</b>	<b>100,000.00</b>	<b>100,000.00</b>	<b>25,000.00</b>	<b>25,000.00</b>

**7. Justification for the adjustments being made in request (Use as much space as necessary)**

- (1) It took the Department of Corrections longer than anticipated to advertise, interview and hire the program supervisor and officer. We would like to extend the grant ending date from June 30, 1991 to September 30, 1991 in order to spend most of the personnel funding in support of the grant purpose.
- (2) Even with extending the grant period, there will be \$2,000 surplus in the personnel category. The officer hired needs basic and advanced drug enforcement training and the supervisor needs management training. We are requesting that \$2,000 be transferred from personnel to the travel/training category to cover these costs. The next DEA training is scheduled for May 15 - May 30, 1991 in Seattle. The estimated travel costs include:
- (a) Round trip flight to Seattle: \$575.00
  - (b) Per diem (15 days X \$35): \$510.00
  - (c) Lodging - N/A (staying at Police Academy)
  - (d) Registration - no charge
- The management training has not been scheduled but should be announced during the next month. Estimated costs, location, etc. will be submitted on a grant change form when this information is available.
- (3) The contractual services for monthly charges on radios and phones is less than anticipated. However, the drug testing field kits (under supplies) have increased in price from \$3.50 to \$5.75 per kit. To allow us to continue with the drug testing throughout the grant period we need to transfer \$2,500 from contracts to supplies.

The changes requested will allow us to accomplish all grant goals and objectives, efficiently establishing this new program.

Grant Program Director (Signature)	Date:	Approved by CCJJ Official (Signature)	Date:

