



**FIXED-PRICE - INTERNAL ACCOUNT EXTENSION REQUEST FORM**

**1. Award:**

A. Principal Investigator:	_____	F. KFS Award Number:	_____
B. College/Dept/Division:	_____	G. KFS Chart:	_____
C. Fiscal Administrator:	_____	H. KFS Acct Number(s):	_____
D. Sponsor:	_____	I. myGRANT ID:	_____
E. Project Title:	_____		

**2. Extension Request:**

This form may be used to request extensions for awards that meet all of the following criteria:

- \*Fixed-price award;
- \*Termination date is not stated in award documents;
- \*No change in scope or to the sponsor-approved budget is being requested; and
- \*The project is not complete.

(If the project is complete, the scope of work is complete to the sponsor's satisfaction, and there is a residual balance, use the ORS Form 2 - FIXED-PRICE - RESIDUAL BALANCE CLOSEOUT FORM)

Current Termination Date: \_\_\_\_\_ Requested Termination Date: \_\_\_\_\_

Reason for Request:

**3. Signature**

By signature below, I hereby certify that the award meets all criteria listed in Section 2, above.

Principal Investigator:

_____	_____	_____	_____
Signature	Print Name	Email Address	Date

**4. FOR ORS USE ONLY:**

Confirmed Fixed-Price?      Yes      No

Cash Balance      \$ \_\_\_\_\_      Balance Date \_\_\_\_\_

Reviewed/recommend approval:

	_____	_____
Approved      Disapproved	ORS Accountant	Date
	_____	_____
	ORS Director	Date