**PROJECT CHANGE REQUEST FORM – Non Research**

This form is to be used to record changes for non research projects

 and budget holders and internal fund codes for research projects.

Any change in research funding should come through the Research & Innovation Division on a Grant Record Letter (GRL) Re-Record.

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| **Project Number** |       |

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| **Revised Project Title/ Description****(max 254 characters)** |       |

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| --- | --- | --- | --- | --- |
| **Revised****End Date** |       |  | **Revised Short Description****(max 30 characters)** |       |

|  |  |
| --- | --- |
| **Revised Responsible Officer UQ Username** | **Revised Responsible Officer Full Name** |
|
|       |       |

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| --- | --- | --- | --- | --- | --- |
| **Additional Source of Funding** | **Fund Code****xxx** | **Function Code****xx** | **Funding amount****(Ex-GST)** | **GST** | **Total Amount of Funding** |
|       |     |    | $      | $      | $      |
|       |     |    | $      | $      | $      |
|       |     |    | $      | $      | $      |
|       |     |    | $      | $      | $      |
|       |     |    | $      | $      | $      |

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| **Revised Underwriting Account:**Please provide a School/Centre Institute Chart of Account string from which underwriting expenses will be incurred: | **Operational Unit****Code****xx xxx xx** | **Site****Code****xx** | **Fund** **Code****xxx** | **Function****Code****xx** |
|       |    |     |    |
| **Supporting documents attached:***If this change request is for an additional source of funding:*[ ]  Attach to this form formal documentation to confirm the offer of funding.*If this change request is for a change to the project end date:*[ ]  Attach to this form documentation outlining the reasons for this. |
| **Additional Comment:** |       |

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| **Responsible Officer/Budget Holder** |  | **Head of Faculty/School/Centre/Central Unit** |
| Print Name:       |  | Print Name:      |
| Signed: Date:      |  | Signed: Date:      |
|  |  |  |
| **School Finance Officer** |  |  |
| Print Name:      |  |  |
| Signed: Date:      |  |  |
| Phone:      |  |  |
| Email:      |  |  |