

VPRED NO-COST EXTENSION REQUEST

Name: _____

Department: _____

Index Title: _____

RED Index #: _____

Total Awarded (all years): _____

Current Balance: _____

Requested End Date (Month/Year): _____

Request Instance: _____ 1st _____ 2nd _____ 3rd

Justification:

(Indicate why funds have not been expended and provide details of how the funds will be spent, including a timeline as appropriate.)

Attachments (one of the following required for all NCE requests except those involving IRD funds):

- Letter of Hire and MOU
- Financial Commitment Summary

Faculty Member Date

Associate VPRED Date

RED Determination:

Request Approved as Listed Above: _____ Request Denied: _____

Request Approved with Conditions: _____

Additional Comments:

VPRED Date