



ORS Proposal No.
Date
Award Agency

Preparer Name	Email	ORG #
Project Title	PI Name	Project #

Will the rebudgeting: (Check yes or no for each as applicable)

Yes	No	Impair your ability to complete the project as approved by the sponsor?
Yes	No	Increase the total direct costs to the grant/contract?
Yes	No	Involve using funds for purposes disallowed as a condition of the award?
Yes	No	Change the scope or objectives of the project?

REBUDGET WORKSHEET

Fill in the current budget and amount rebudgeted columns.

Budget Category	Current Budget	Amount Rebudgeted (+ or -)	Revised Budget
Salaries & Wages			
Fringe Benefits			
Supplies			
Domestic Travel			
Foreign Travel			
Sci, Tech & Mgnt Consulting			
Other Direct Costs			
Equipment			
Subcontracts > \$25,000			
Subcontracts < \$25,000			
Scholarships			
Tuition			
F&A			
Total			

Explain why funds are available to be moved from the budget category where they were originally budgeted.

Explain why this change is necessary and the impact on the approved scope of work.

APPROVAL

PI signature _____ Date: _____

ReFS FC: _____ Date: _____

If agency approval is required who is the SPC: _____

If subrecipient is involved:

Sub-recipient Coordinator: _____ Date: _____

Senior Staff Account: _____ Date: _____

If agency approval is required route to Pre-Award. Date routed: _____