

Alabama State Council on the Arts Project Change Form

Save this form to your computer and fill it out using Adobe Acrobat. Complete and submit this form for approval if you need to make a change in your project scope or personnel. Make sure to sign and date at bottom of form.

Organization Name: Grant #:

Mailing Address:

City: Zip Code:

What aspect(s) of the project has changed from your original grant application? (check all that apply)

- Project Dates Project Format Artistic Personnel Amount of Funds Needed
- Venues Budget Administrative Personnel Will Not Complete Project
- We Lost or Never Received a Payment Audience Served Matching Funds Decreased
- Other

Explain any changes that are different than grant proposal.

Explain why these changes are necessary.

How will these changes affect the scope of the project?

Grant awards are made based on the project information provided in the grant application. Do you feel these changes fundamentally and/or significantly alter your project from its original intent? Yes No

Complete this section only if you are changing your project director and/or authorizing official

Past Project Director: New Project Director:

New Project Director Phone#: New Project Director Email:

Past Authorizing Official: New Authorizing Official:

New Authorizing Official Phone#: New Authorizing Official Email:

Authorizing Official Signature _____ **Date** _____

ASCA Approval _____ Date _____ (rev 12/2018)