Carnegie Mellon University
Sponsored Projects Accounting
(FA10) Internal Extension Form Process - Procedure
Updated: April 24, 2006

Frequency: Varies
Responsible Staff: Sponsored Projects Accountant
Approval Required: Manager / Assistant Manager, Post Award Accounting

Summary:
The Award Extension form is submitted when a department is confident that they are going to receive an amendment-with either additional time or additional time and funding, but have not yet received the required documentation from the sponsor.

Procedure:
1. SPA receives the IEF (Attachment PA-O) from OSP

2. Review the form to ensure the information is accurate and the appropriate signatures are included on the form.

   The following signatures are required for processing:
   - Principal Investigator
   - Business Manager
   - Office of Sponsored Programs

   The Department’s alternate charge string must be provided. In the event the amendment is not received, any costs incurred as a consequence of the approval of the form will be charged to this account.

3. Change the End Date of the award in Oracle to the date provided on the form. **NOTE:** **Do not extend the Installment End Date. This date should remain the date through which the award can be billed.**

4. Change the Close Date accordingly.

5. Change the Award Status to “AT RISK” and update the At Risk Reason field in the Descriptive Flex Field screen.

6. Save the changes made to Oracle.

7. In Oracle re-baseline the award and project budgets - follow steps 7 through 10 in the procedures for Entering a Budget

8. Notify the following people/departments that the procedure has been completed:
   - Department Business Manager
   - OSP
   - Cash Management Accountant
CARNEGIE MELLON UNIVERSITY
REQUEST FOR APPROVAL FOR AWARD EXTENSION

ORACLE AWARD NO. __________________________

DEPARTMENT ________________________________

CONTACT PERSON ____________________________

PHONE ____________________________

ANTICIPATED AWARD EXTENSION IS A [PLEASE SELECT ITEM] ____________________________
If "OTHER", please provide a short explanation:

INDICATE THE ANTICIPATED MODIFICATION

ANTICIPATED END DATE ____________________________

ANTICIPATED INCREASE IN FUNDING ____________________________

SIGNATURE OF PRINCIPAL INVESTIGATOR ____________________________ DATE ____________________________

AN URGENT NEED EXISTS TO EXPEND FUNDS PRIOR TO RECEIPT OF A FULLY EXECUTED MODIFICATION

SIGNATURE OF BUSINESS MANAGER ____________________________ DATE ____________________________

IN THE EVENT THE REQUEST DESCRIBED ABOVE IS NOT RECEIVED, ANY COSTS INCURRED AS A CONSEQUENCE OF THE APPROVAL OF THIS REQUEST WILL BE CHARGED TO THE ACCOUNT LISTED

DEPARTMENT COST SHARING AWARD NO. ____________________________

THE DEPARTMENT HAS AGREED TO PROVIDE FUNDING FOR THE COSTS INCURRED IN THE EVENT THAT THIS REQUEST IS NOT RECEIVED.

COLLEGE BUSINESS MANAGER ____________________________ DATE ____________________________

I CONCUR WITH THIS DECISION

ADDITIONAL COMMENTS

Mall (WH 405) or Fax (x6279) form to Office of Sponsored Programs

OFFICE OF SPONSORED PROGRAMS - APPROVAL - DISAPPROVAL - RESTRICTIONS

Office of Sponsored Programs ____________________________ DATE ____________________________