

## Affordable Connectivity Outreach Grant Program ACP Outreach Grant Amendment Request Form

**Applicant Name:**

**Award #:**

**Date of Request:**

**Name of Requester:**

**Role of Requester:**

**Document Purpose:** This document serves as the official process for grantees to submit the following:

1. Request to remove funding holds or special terms and conditions.
2. Request an amendment for changes that require an amendment to the award conditions and requires FCC prior approval.

**Instructions:** Please complete the following table and provide the necessary information.

Type of Request is:			
a) remove funding holds or special terms and conditions.		b) amendment required that changes award conditions and requires FCC prior approval.	
<input type="checkbox"/>	Additional Information Required	<input type="checkbox"/>	No Cost Period of Performance Extension
<input type="checkbox"/>	Revised Budget*	<input type="checkbox"/>	NoA Revision
<input type="checkbox"/>	Revised SF-424, SF-424A Required	<input type="checkbox"/>	Approval of Subrecipients
<input type="checkbox"/>	Cost-Share Documentation Required	<input type="checkbox"/>	Removal of High-Risk Designation+
<input type="checkbox"/>	Provide NICRA	<input type="checkbox"/>	Change in Scope
<input type="checkbox"/>	Approval of Contractors	<input type="checkbox"/>	Budget Revision+
<input type="checkbox"/>	Contract(s) Required – Greater Than or Equal to \$250,000	<input type="checkbox"/>	Change in Key Personnel**

\* Please refer to Special Term in your Notice of Award.

+ Required for cumulative transfers among direct cost budget categories totaling more than 10 percent of the total budget must have prior written approval by FCC.

\*\* Please refer to FCC Grants Manual.

<b>Explain reason for change(s) and identify required documentation uploaded to GrantSolutions:</b>

<b>For FCC Use Only:</b>			
<input type="checkbox"/>	Amendment Required	<input type="checkbox"/>	Amendment Not Required
<input type="checkbox"/>	Approved	<input type="checkbox"/>	Denied

Request(s) Approved:	
Approved by:	Denied by:
Request(s) Denied:	
Reason for Denial (if applicable):	
Effective Date:	
Signature	

NOTE: This serves as your formal notification that all requests for funding holds or special terms and conditions, as notated above, have been approved.