

**NORTH CAROLINA STATE UNIVERSITY
OFFICE OF CONTRACTS AND GRANTS
PRIOR APPROVAL REQUEST**

This request is to be completed and submitted to the Office of Contracts and Grants for all actions requiring prior approval.

Principal Investigator: _____

Funding Agency: _____ *Account No:* _____

Approval is requested for action(s) involving:

- | | |
|-----------------------------|---|
| _____ Domestic Travel | _____ No-Cost Extension (1 st. Request) |
| _____ Foreign Travel | _____ Pre-award Cost |
| _____ Equipment Acquisition | _____ Subcontracting |
| _____ Rebudgeting | _____ Other |

If the request requires rebudgeting, Indicate the budget categories and amounts that will be affected.

Category	Object Code	+ or -	Amount
Salaries	_____	_____	_____
Fringe Benefits	_____	_____	_____
Contracted Services	_____	_____	_____
Supplies	_____	_____	_____
Domestic Travel	_____	_____	_____
Foreign Travel	_____	_____	_____
Other Travel	_____	_____	_____
Current Services	_____	_____	_____
Fixed Charges	_____	_____	_____
Other Costs	_____	_____	_____
Equipment	_____	_____	_____
Student Aid	_____	_____	_____
Indirect Costs (IC)	_____	_____	_____

Explanation/Justification for requested action:

Certification:

This is to certify that this request is consistent with the scope and objectives of the project; complies with grant terms and conditions; and represents effective utilization of resources.

_____	Date	_____	Date
Principal Investigator		College Dean/Designee	

_____	Date	_____	Date
Department Head		Office of Contracts & Gra	