**No Cost Extension (NCE) – CHEST Foundation Grant**

*NCEs must be submitted at least sixty (60) days prior to the established end date.*

*Proposed end dates cannot exceed twelve (12) months past the original end date.*

*Applicants may receive up to one (1) NCE per active grant.*

*CHEST Foundation will notify the grantee of a decision within 30 days of receiving the request.*

Grant Awarded:

Grant Project Title:

Grantee Name:

Original Start Date:

Original End Date:

Proposed End Date:

Will You Be Spending Grant Funding As Originally Budgeted?  Yes  No

*Please provide a revised budget for review and approval. The revised budget should compare the original allocations against any current/new proposed costs.*

Description of Progress to Date:

Reason for Requesting a No Cost Extension:

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Applicant Signature | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CHEST Foundation Signature |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Applicant Name Printed | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CHEST Foundation Position |

*Reasons for requesting a no cost extensions:*

* *Additional time beyond the established grant program end date is required to ensure completion of the grant project*
* *Additional time is needed to ensure a proper phase-out of project research for best practice and final report findings to be established*
* *The scope of work is not complete due to unforeseen circumstances and there is a need to extend the grant program end date*
* *There are sufficient funds remaining to cover the suggested date extension*

*Reasons for a no cost extension to be denied:*

* *Amount of additional time seems excessive compared to the tasks to be completed*
* *The scope of work has been completed and there is no need to extend the grant program end date*
* *Grantee cannot expend funding as planned*
* *Grantee cannot provide sufficient interim program accomplishments to justify extending the grant program end date*