

Please fill and send scan via E-Mail to your project manager at plan:g.

Nota bene:

- Hand in the request as soon as possible.
- Hand in the request in order to complete program-related activities only (no new activities will be funded in a no-cost extension that does not permit the use of unobligated balances of funds).
- The extension shall facilitate an orderly end of the agreement.
- All terms and conditions of our contract apply during the extension period.

1. Project Details (please fill):

Project Number:	
Project Short Title:	
Date of request:	

2. Request Details (please tick check boxes and fill):

In order to complete all program related activities as stipulated in the project agreement no. plan:g-_____ we request

- a no-cost extension of ____ months
- a low-cost extension of _____ EUR

With possible reference to the logframe, please indicate the bona-fide need and list of remaining activities along with their corresponding objective and anticipated timeline completion date (add lines if needed):

Activity no / description:	Leading to result no / description:	Original timeline for completing activity:	Anticipated timeline for completing activity (as of date of request)

3. Required Documentation (if applicable; if necessary, refer to appendix):

- I. Brief outline of activities that will be completed during the no costs extension period
- II. Detailed budget outlining the activities that will be completed during a low costs extension period

No-cost- or low-cost Extension
Request and Approval Form



- III. Timeline to provide continuity of cooperative agreement/grant support while a competing application is under review or permit an orderly phase-out of a project that will not receive continued support.
- IV. Impact on the program if not approved.

For the Applicant:

Place and Date

Place and Date

Signature

Signature

Function

Function

To be filled by plan:g:

	Checked:	Comments:
I.		
II.		
III.		
IV.		

Approved on

Approved by