

Instructions

1. Complete the top four fields (Subgrantee name, Subgrant number, Amount, Request #). Except for Request #, all of the information is found on your original subgrant.
2. Check one of the boxes (either "Will NOT impact SOW" or "Will impact SOW").
3. Complete the budget section *only* if you are requesting a change to the current approved subgrant budget.
4. Complete the justification for ANY type of change to the subgrant (either budget or scope of work). Below are some examples of justifications for different changes. Attach additional sheets as needed. You can also type "See attached" in the box on the form, then type your justification in Word if there is not enough room on this form. Please remember to attach any additional sheets or back-up documentation.
5. Sign the document in *blue ink*, and mail the original with any attachments to: SAPTA, Attn: Marianne Lockyer, 4126 Technology Way, 2nd Floor, Carson City NV 89706.
6. If you have any questions about completion of this form, please contact your assigned SAPTA analyst.

Justification Examples:

Example 1: Changing budget by reallocating monies within categories.

The above budget changes reflect the actual budget as it stands today. Due to turnover of Personnel, and a cost savings in Operating, we are re-allocating these funds into Travel and Other. The additional monies in Travel will be used for the out-of-state conference on SBIRT, May 2011. The attached budget shows the actual breakdown of how the funds will be used. The additional monies in Other will be for increased cost of an A-133 audit. Our agency was recently awarded additional federal funding, which has placed us over the \$500,000 limit requiring an A-133. The attached budget shows the specifics regarding the A-133 costs and proportion being charged to this grant.

Example 2: Adding/deleting line items in a category, but not changing the overall dollar amount.

This request is to revise the amount of funds awarded to the following contract/subrecipient.

Subrecipient: Dolly's Daycare: Original Award = 10,000; Revised Award = 5,000. A copy of the revision is attached.

The \$5,000 dollars being removed from this subrecipient will be reallocated to the following contract:

Data Analysis: \$5,000. A copy of the contract is attached.

Frequently Asked Questions (FAQs)

1. When do I submit this form?

- Funded SAPTA programs are required to submit this form **anytime** they make a change to the current subgrant (including both budget and scope of work). If a program incurs costs on a change that was not approved by SAPTA, the program will be responsible for those costs.

2. When do I attach a revised budget or scope of work?

- You will attach a revised budget and/or scope of work any time you wish to change the current approved forms. It is advisable to contact your assigned analyst prior to submitting this form to ensure that you have all the required attachments/forms needed as back-up documentation.

Subgrant assurances state the following in regards to changes to the approved subgrant documents (page 2, section A, #4):

"Requests to revise the approved subgrant must be made in writing using the appropriate forms and provide sufficient narrative detail to determine justification. Expenses that are incurred without prior SAPTA approval may not be reimbursed. SAPTA has the authority to require an amendment for any change, but will generally follow these parameters in the process of determining whether an amendment is needed:

- Any overall increases or decreases to the award will require an amendment.

- All increases to the Personnel category will require an amendment.

- Any changes to the Scope of Work will require an amendment.

- As long as there are no changes to the Scope of Work, increases to Personnel, or overall changes to the subgrant amount, minor categorical changes (including shifting funds to previously unfunded categories) can be accomplished as a simple change request.

- Numerous changes to the budget over the course of the budget period and the nature of the changes could result in SAPTA requiring an amendment."

**SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY
SUBGRANT AMENDMENT FORM**

Subgrantee Name: _____

Subgrant Number: _____

Award Amount: _____

Request #: _____

Scope of work, check one:

Will NOT impact current SOW

Will impact current SOW

If this item is checked, attach a copy of the revised SOW

Budget (complete only if revising the budget)

Categories	Current Budget	Change Request	New Budget	Percent Change
Personnel:				
Contract/Consultant:				
Travel:				
Training:				
Operating:				
Other:				
Totals:				

**SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY
SUBGRANT AMENDMENT FORM**

Justification, explain why the requested changes are necessary for the successful completion of this subgrant. Please attach additional pages as needed for the justification.

Justification:

By signing this document, the authorized signatories acknowledge the above as the new standard of practice for the above referenced subgrant. Further, the signatories understand this document does not alter, in any substantial way, the non-referenced contents of the original subgrant award and all of its attachments.

Signature Authorized Subgrantee Official and Title

Date

SAPTA Program Analyst

Date

SAPTA Program Analyst Supervisor

Date

SAPTA Agency Director

Date

MHDS Administration

Date

SAPTA Fiscal Staff Use Only

- Costs allowable? Y N
- Calculations correct? Y N
- Are revised SOW and/or budget forms attached? Y N
- NHIPPS Revised: Y N

Fiscal initials

Fund Source	CFDA	Amount	% of Funds