**Request for change of intervention,**

**intervention period, and/or budget**

|  |  |
| --- | --- |
| Fund | Danish Emergency Relief Fund |
| Organisation |  |
| Contact person, name and e-mail address |  |
| Intervention titel |  |
| Journal nr. |  |
| Approved intervention period |  |
| Suggested new intervention period |  |

**How this form should be used (delete this manual before submission of the form)**

This form can be used if you during the intervention must:

1. Change the period of the intervention. This can for example be if you need to extend the intervention period.
2. Change in the objectives, partnerships or target groups of the intervention, e.g., if there is a need to cancel or add activities that will affect the realisation of the objectives defined for the intervention.
3. Change the approved budget of the intervention. This can for example be if you need to move funds between the main budget lines or need to move funds from the budget margin.

Please read the rules for budget changes before you submit this form to CISU. The rules are described in section 5 of the Grant Management Guide.

**The completed form should be submitted in Vores CISU before the end of the approved intervention period.**

|  |
| --- |
| **Reasons for no cost extension and/or budget revision** |

*Write your text here.*

|  |
| --- |
| **Budget revision of grant from CISU** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Latest approved** budget for CISU grant\* | Proposed **change** of budget \*\* | Proposed **revised** budget |
| 1.Local Partner Activities |  |  |  |
| 2. Local Partner Investments |  |  |  |
| 3. Local Partner Staff and Volunteers |  |  |  |
| 4. Local Partner Administration |  |  |  |
| 5. Local Partner Risk Management & Safety Measures |  |  |  |
| 6. Local Assessments |  |  |  |
| 7. Local/Regional Coordination Participation |  |  |  |
| 8. DK Partner Activities & Project Monitoring |  |  |  |
| 9. DK Partner Project Support Costs |  |  |  |
| 10. Total Project Costs |  | 0 |  |
| 11. Contingency (min. 6% - max. 10% of 10) |  |  |  |
| 12. DK Partner Auditing |  |  |  |
| 13. Total Costs |  | 0 |  |
| 14. DK Partner Administration (max 5% of 13) |  |  |  |
| 15. Total Applied Amount from DERF |  | 0 |  |

\* Latest budget approved by CISU

\*\* Write “+” or “–“ in front of the amount to indicate whether you wish to add to the budget line or subtract from the budget line. The total of the proposed changes must sum to zero.