

Project Change Request

Form Preview

Grantholder details

* indicates a required field

Grantholder name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Grantholder email *

Must be an email address.

Grant awarded *

Year of award *

Must be a number.

Project Change Request

* indicates a required field

Project title *

In as much detail as possible, please outline the requested change/s to your original research design *

Please provide a rationale for the change/s *

Do you anticipate any problems that may arise as a result of the change/s? *

Yes

No

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If yes, please outline these below and describe how you intend to mitigate or resolve these.

Will the change/s impact on the original project budget? *

- Yes No

If yes, please provide details of any additional expenses that will be incurred and outline how the budget will be altered to cover these.

Will the change/s impact on the original project and milestone reporting timelines? *

- Yes No

If yes, please ensure you also complete the Request for Extension form (available on the RACGP Foundation website)

Please upload any supporting documentation

Attach a file:

PDF format preferred

Next steps

Approving the project change/s

After submitting this form, your request for will be forwarded to the RACGP Foundation & Research team for review. You may contacted for additional information, if required.

Project change requests are normally approved within 10 business days. If your request is approved, you will receive written confirmation from the RACGP Foundation. You may not alter the project design until your request has been approved. To do so would breach your grant agreement.

Please indicate you have understood

- I understand