



GRANT AMENDMENT REQUEST
 NORTH DAKOTA STATE LIBRARY
 SFN 62354 (06-2023)

To stay in compliance with the grant process, any changes made to approved grant activities after the award date must be approved by the State Library prior to their implementation. Submit request to: ndsl-ld@nd.gov

Grant Recipient (library) Name:		Date:
Grant Recipient (library) Address:		
City:	State:	ZIP Code:
Project Director Name:	Email Address:	Telephone Number:
Dates covered in this report for your grant:	Beginning date:	Ending date:
Grant Name:		
Describe the amendment you are requesting to your grant. Attach additional pages if more space is needed. If you are requesting a budget revision, be sure to fill out the chart below.		
	Original Budget	Revised Budget
Library Materials		
Supplies		
Programs		
Other		
Totals		
Project Director's signature (Fiscal Agent if applicable)		Date

FOR NDSL OFFICE USE ONLY

Amendment Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	State Librarian Signature	Date
--	---------------------------	------