

No Cost grant extension request (up to maximum of 6 months)

This form should be completed and e-mailed back to Bowel Research UK. Please email it to: [research@bowelresearchuk.org](mailto:research@bowelresearchuk.org)

This template is for requests for no-cost grant extensions of up to 6 months for Bowel Research UK funded grants. Requests will be considered by the Chair of the Grants Committee, and Finance Director. Incomplete forms will not be considered.

|  |
| --- |
| Date: |
| Grant reference and start date: |
| Grant holder(s):  Name of researcher if salary or PhD stipend was covered by our grant: |
| title of project:  Project start date:  Project end date:  Extension request start date:  Extension request end date:  Grant used to date: |

|  |
| --- |
| **Summary of project (as detailed in original application) (max 500 words)**  **Reason for no cost extension (500 words)**  **Details of progress (maximum 500 words)**  **Additional comments** |

Supporting documents (if any) should be attached to the application.

**Signed:**

**Dated:**

**For office use only**

**Chair of Grants Committee/Director of Research approval : name …………… date: ……..**

**Finance Director approval : name ……………date: …….**