**Rising Star Diversity Grant**

**Request for Change**

*Submit completed form for approval to the VP-Research before any changes take place*

Today’s Date:

Awardee’s Name:

Department:

Semester when funding was originally proposed for use:

Originally, what was the salary-support indicated to support?

Course Buyout ☐ TA/GA☐ Summer Salary☐ Other: Click or tap here to enter text.

In the space below, please indicate the requested change (e.g., timing of funds, use of funds). *Please note, that funds must be used within two years of the awardee’s start date and cannot be extended beyond.*

In the space below, please briefly described the reason for the change

Request for Change is:

Approved

Denied