No Cost Extension (NCE) Request Form ⅋

Many sponsors allow no cost extensions (NCE) on grant awards. A no cost extension pushes back the final project end date of the previously approved project period. This is typically allowable one time for a period of up to 12 months beyond the original expiration date shown in the award agreement. In order to request a NCE, there must be work left to complete on the original objectives **AND** there must be grant funds remaining.

In a NCE:
· No additional funds are required to be obligated by the sponsor; existing funds remain.
· The project's originally approved scope will not change.`
· Additional time beyond the initial expiration date is required to ensure adequate completion of the originally approved project.

The best time to request a no cost extension is usually 30-90 days prior to the project end date and can vary by sponsor. Just because there are funds left is not a justifiable reason for a no cost extension. There must be work left to accomplish on the original project.
As they are an extension of a legal agreement, all no cost extensions must be documented in writing. Until written sponsor approval is received the award will not be extended. No spending should ever occur after the project end date. See FAQs (https://www.marquette.edu/research-sponsored-programs/documents/no-cost-extension-guidance-faq.pdf#search=no%20cost%20extension%20FAQ) for more information.

This form is to be completed by Principal Investigators (PIs) requesting a no cost extension for their externally-funded project. Please provide all requested information to facilitate review of your request.

* This form will record your name, please fill your name.

1. PI Last Name *

2. PI First Name *

3. PI E-mail Address *

Please enter an email

4. Title of Project for NCE request: *

5. MU Account # *

Account number will be five digits starting with a 7 (e.g., 7XXXX)

[   ]

Number must be between 70000 ~ 79999

6. Project's Current End Date *

[📅]

7. I am seeking an NCE from: (select one) *

( ) National Institutes of Health (NIH)

( ) National Science Foundation (NSF)

( ) Other Sponsor (including when MU is the subaward)

8. Is this your first NCE or is it a subsequent extension request to NIH? *

( ) First request

( ) First request on an R15 - Academic Research Enhancement Award (AREA)

( ) Second or subsequent extension request

9. Is this your first NCE or is it a subsequent extension request to NSF? *

( ) First request

( ) Second or subsequent extension request

NIH Second or Subsequent NCE Request

A second or subsequent no cost extension for an NIH award is a prior approval request.

A request to extend the initial budget period of the project can be made when the following conditions are met:

- If no additional funds are required from the NIH awarding office
- If there will be no change in the project's originally approved scope
- If no term of award specifically prohibits the extension

In order to request an extension, one of the following criteria must be applicable:

- Additional time beyond the established expiration date is required to ensure adequate completion of the originally approved project
- Continuity of NIH grant support is required while a competing continuation application is under review
- The extension is necessary to permit an orderly phase-out of a project that will not receive continued support

NIH allows a no cost extension to be made up to 90 days prior to the award end date. This form may be submitted to ORSP prior for review, but no extension can be submitted until the extension link is opened in eRA Commons. NCEs may be submitted up until the project end date, although it is preferable to submit earlier to allow time for the approval.

Information regarding a second or subsequent no cost extension request can be found at Prior Approval - No Cost Extension (https://www.era.nih.gov/erahelp/commons/Commons/Prior_Approval%20Module/Request_NCE.htm?Highlight=prior%20approval%20no%20cost%20extensions).

If a no cost extension is granted, the progress report will serve as the annual report. A final report (FRPPR) will be due at the end of the new project period.

This form is for projects on which the award is made directly to Marquette from the NIH. If you are a subawardee to another entity, please use the Other Sponsor NCE submission form.

139. Are you looking to complete an NIH Second or Subsequent NCE Request? If so, select yes and proceed with the form. If no, click Back and select the appropriate option. *

  ◯ Yes

140. NIH Project Number *

  [   ]

  Enter your answer

141. Are you requesting a 12 month no cost extension? (12 months is the maximum request.) *

  ◯ Yes

  ◯ No

142. If no, how many additional months are you requesting? *

  [   ]

  The value must be a number

143. Rationale for NCE less than 12 months *

Only answer if you are requesting less than 12 months.

[   ]

144. During the no cost extension period, will you be continuing to strive toward the originally proposed and approved objectives? *

◯ Yes

◯ No

145. If no, please explain *

Only answer if you will NOT be continuing toward the original objectives.

[   ]

146. Will you be changing or expanding the originally approved scope of work? *

◯ Yes

◯ No

147. If yes, please explain *

Only answer if you will be changing or expanding the scope of work.

[   ]

148. What is your most recent IRB approval date? *

(enter 1/1/1111 if no human subjects involved)

[   ]

149. What is your most recent IACUC approval date? *

(enter 1/1/1111 if no animals involved)

[   ]

150. Estimated remaining balance as of the original expiration date *

Please verify with ORSP or with your unit's director of business affairs. The amount entered here should match the amount listed in the budget to be attached later in form.

[   ]

The value must be a number

151. You must commit some amount of measurable effort during the NCE period. The effort committed during the NCE can be different than what was promised throughout the life of the base grant, and it can be a very small amount (ex. .25 summer months). The effort can be paid from the grant or cost shared.
How much effort do you plan to devote to this project in the NCE period? *

Select one method to report your effort.

◯ Summer Months & Academic Year Months

◯ Calendar Year Months

152. If Summer Months & Academic Year Months, please specify: *

Enter as: [#] Summer Months, [#] Academic Year Months

[   ]

153. If Calendar Year Months, please specify: *

Enter as: [#] Calendar Year Months. If effort already entered as summer and academic year months in previous question, enter 0.

[   ]

The value must be a number

154. Will this effort be: (select one) *

◯ Grant Funded

◯ Cost Shared

155. Are there any subawards or other external agreements (e.g., consulting, etc.) that will need to be extended as a result of your no cost extension? *

◯ Yes

◯ No

156. If yes, who is the other party? *

[   ]

157. Should their no cost extension match your new end date? *

○ Yes

○ No

158. If no, what should their new end date be? *

[📅]

159. Will there be any budget increase or decrease in the NCE period? *

○ Yes

○ No

160. If yes, please explain *

[   ]

161. Do you have another party that needs to be extended? *

○ Yes

○ No

162. Please upload (in .pdf format) a Progress Report. This should be a brief (not to exceed one page) progress report that communicates scientific progress made from submission of the last RPPR to the present. *

When uploading, use the following naming convention: **NIH Grant Number_PI Last Name_Progress Report**. For example, R01 CA 123456-01A1_Smith_Progress Report

[⤒ **Upload file**]

File number limit: 1   Single file size limit: 10MB   Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

163. Please upload (in pdf format) a budget. It should be a tabular budget reflecting the proposed plans to use the remaining funds (ORSP or your business manager can help with this if you specify roughly how much you want to spend on publication costs, how much on personnel, how much on supplies, etc.). The amount listed in this budget document should match the amount entered in earlier budget question. *

When uploading, use the following naming convention: **NIH Grant Number_PI Last Name_Budget**. For example, R01 CA 123456-01A1_Smith_Budget

⬆ **Upload file**

File number limit: 1   Single file size limit: 10MB   Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

164. Please upload (in pdf format) a justification. This should be a detailed explanation of why the project could not be completed by the originally approved end date and scientific rationale for continuing the project (this does not need to be lengthy – a healthy paragraph will suffice). *

When uploading, use the following naming convention: **NIH Grant Number_PI Last Name_Justification**. For example, R01 CA 123456-01A1_Smith_Justification

⬆ **Upload file**

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165. I, as Principal Investigator of this award, certify that to the best of my knowledge the information included in this form is true. Please confirm by typing your name below as a form of signature. *