



Dr. John D. Barge, State School Superintendent
"Making Education Work for All Georgians"

Georgia Department of Education
Budget/Program Amendment Form Instructions
2012-2013
21st Century Community Learning Centers

Type all information in **RED**. Signatures are **BLUE** ink.

1. Sub-grantee name. (Name on grant application) and date amendment is submitted.
2. Project/program director's name and phone number
3. Project/program director's email address
4. Check line to indicate type of amendment: Program, Budget or Both
- 5a. Insert Program Amendment (PA) number. NOTE: The number should reflect the amendment from the beginning of the subgrant and will continue sequentially until the subgrant ends. The Program Amendment (PA) number will not start over each fiscal year.
(Example: PA/**1**, PA/**2**, PA/**3**, etc.)
- 5b. Insert Budget Amendment (B) number. NOTE: The Budget Amendment (B) number WILL start over each fiscal year.
(Example: FY12B/**1**, FY12B/**2**, etc. and FY13B/**1**, FY13B/**2**, etc. and FY14B/**1**, FY14B/**2**, etc.)
- 5c. Use this line, if your amendment requires BOTH a program and budget amendment. NOTE: Follow the same instructions for 5a and 5b. The amendment numbers MAY not be the same due to the fiscal year. (Example: PA/**1**, FY12B/**1**) (Example: PA/**2**, FY12B/**3**)
(Example: PA/**3**, FY12B/**1**)
6. Page number in original grant application where language for proposed amendment is located.
7. Insert current language in original grant application or most recently approved amendment.
8. Insert amended language to reflect requested change(s) to original grant application or previous approved amendment (Addition or deletion to language).
9. State the reason for the change. How will this change benefit your sub-grant? OR Why is it necessary to make this change? (If this is a change in program director, superintendent, etc., state that.)
10. State how the proposed amendment is consistent with the goals/objectives of the sub-grant.
11. State the cost associated with the proposed change in detail. State an estimation of the proposed budget change. Include from which line item fund will be moved into for the proposed change. NOTE: If a 10% increase or decrease results, then a budget amendment is required. If there is not a change in the budget, state "there will not be any changes in the budget associated with this amendment" or something similar.
12. If attachments accompany the proposed amendment, be sure to name each attachment accordingly.
13. Fiscal agent, all joint applicants, program director and superintendent/CEO should sign in **BLUE** ink.

Originals should be mailed to:
Georgia Department of Education
Office of School Improvement
21st Century Community Learning Centers
1862 Twin Towers East
205 Jesse Hill Jr. Drive
Atlanta, Georgia 30334

14. Send an electronic copy to your Regional Education Research and Evaluation Specialist (ERES) and/or Budget Analyst (BA).
15. Fiscal agent, joint applicant designee, program director, superintendent/CEO signatures in **BLUE** ink. Date of signature in **BLUE** ink.