This document describes the procedures that must be followed when a recipient organization determines that their activities will not be completed during the approved project period. A no-cost extension requires prior approval from the Grants Management Officer (GMO).

CDC discretionary grants and cooperative agreements are awarded under a project period system. A project may be approved for multiple years (usually 3-5 years), and is generally funded in annual increments known as budget periods. With rare exceptions, budget periods are 12 months in duration. GMOs can approve up to 12 additional months but no additional funds are awarded to complete the tasks. CDC expects that recipients will complete all requirements of an award by the project period end date; however, a one-time no cost extension may be requested as long as the action is not prohibited in the recipient’s terms and conditions. Additionally, the request should not be submitted for the sole purpose of expending remaining funds – such request will be disapproved. No - cost extensions cannot be processed under expanded authority if the award project period end date has expired.

## CDC Notification

To ensure timely processing of a revised award action and orderly accomplishment of activities, a no-cost extension should be requested at least 60 days prior to the end of the project period by sending a request on official agency letterhead that includes the following:

* Date
* Recipient name and Notice of Award number
* Point of contact – name, phone number, and email address
* Amount of additional time requested
* Reason(s) project could not be completed
* Description of the activities that will be completed during the proposed extension
* Timeline for completion of proposed activities, including time necessary to close-out the award and submit all final requirements to CDC
* For late requests, a justification for missing the deadline
* Explain the effect a denial of the request will have on the program
* Two signatures – Authorized Representative and Project Director/Principal Investigator

## No Cost Extension Request Template

Click here to enter a date.

Centers for Disease Control and Prevention

Office of Grants Services

ATTN: Click here to enter text.

2920 Brandywine Road

Atlanta, GA 30341

Re: Click here to enter text.

No Cost Extension

Dear Grant Management Specialist:

This letter is to request a no-cost extension for the Notice of Award listed above.

Click here to enter text.

If you have any questions regarding this request, please feel free to contact Click here to enter text..

Sincerely,

/s/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Director /Principal Investigator

/s/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Representative