

## REQUESTING CHANGE IN ALLOCATION

To request a change (increase or decrease) in your budget allocation, please complete the **Request for Change in Budget FY 2016 form** that can be found on the Budget Department website under Forms-Budget Planning or in the Budget Planning Link for 2015-2016. This is a protected Excel sheet that only allows you to type in certain cells. If you need more room on in the Explanation areas on the worksheet than is provided on the form, please attach another sheet with the expanded explanation.

This form can be used throughout the year to request changes to a budget. **HOWEVER, during Budget Planning time, all forms requesting an Increase or Decrease in the budget allocation MUST BE COMPLETED, APPROVED, AND TURNED IN TO THE BUDGET DEPARTMENT BY THE DEADLINE DATE FOR SUBMITTING THE BUDGET PLANNING WORKSHEETS.** Budget owners who submit the forms after this deadline risk their forms not being presented for consideration.

Any one time or permanent changes approved to an allocation will be entered by the Budget Department into the appropriate budget worksheet. Individuals will be notified if their requests have been approved or denied.

**Request for Change in Budget (Increase or Decrease)  
FY 2016**

Org Number:  Name of Person Making Request:   
 Org Name:  Phone Number of Person Making Request:

The explanation areas below **MUST BE COMPLETED** or the form will not be forwarded for consideration. This is the only notification you will receive that forms missing justification/explanation areas below will not be considered. You may attach a separate page with your explanation. If you do this, please indicate such in the explanation areas below.

Request Types Available to Use: P = Permanent Increase to Budget    O = One-Time Increase to Budget

REQUEST TO INCREASE BUDGET GOES HERE				Limit Price/Amount, Quantity	Total Increase for This Line	BUDGET DEPT USE ONLY		
Item/Service to be purchased or Item/Service with Increasing Cost	EXPLANATION AREA - Must be completed Request Type Justification	EXPLANATION AREA - Must be completed What will happen to your operations if this is not approved						
					\$0.00			
					\$0.00			
					\$0.00			
					\$0.00			
					\$0.00			
REQUEST TO DECREASE BUDGET GOES HERE				Total Amount of Reduction Requested	Total Decrease for This Line	BUDGET DEPT USE ONLY		
Explanation/Reason for Request (optional)							APPROVE	REJECT
					\$0.00			

By signing this, I agree with everything shown on this form as submitted and I understand I may be called to defend this request.      By signing this, I agree with everything shown on this form as submitted and I understand I may be called to defend this request.

Signature of Submitter:  Date:       Signature of Submitter's CAAG Member:  Date: