**AWARD CONTINUATION PROCEDURE**

**Sponsored Funds** **Wake Forest University**

WFU engages in a variety of sponsored projects from federal, private and not-for-profit sponsors. When we are the recipient of a sponsored funding and the agreement indicates a specific end date and requires a written agreement to confirm continuation of the funding, it may become necessary to continue work on the existing project prior to the receipt of an additional award or contract amendment/ extension. In these circumstances when a Principal Investigator (PI) determines it is necessary to continue incurring expenses prior to receipt of the written authorization, amendment or new agreement; he/she may request a continuation by completing this Award Continuation Form.

If the new award/ amendment/ extension is not realized for any reason, it is the PI’s responsibility to cover the expenses incurred outside of the approved award period. If the PI does not have funds available, it becomes the Department’s responsibility to cover any costs incurred. The PI and the Department must work together to cover these expenses within 60 days of notice of that the continuation will not be granted.

**REQUEST FOR AWARD CONTINUATION**

Permission is requested to incur costs in anticipation of the continuation award or executed agreement. If the continuation is not funded or if the resulting award has a different effective date or awarded amount than expected, all unallowable charges will be the responsibility of the PI and/ or the PI’s Department.

**Send completed form by email to** [**grants@wfu.edu**](mailto:grants@wfu.edu)

**Current WFU Grant Number:** Click here to enter text.

**Sponsor/s:** Click here to enter text.

**PI:** Click here to enter text.

**Provide a brief justification or attach sponsor documentation that a continuation is forthcoming.** Click here to enter text.

**By signing below, the PI, Grant Manager, and Department Chair or Cost Center Representative acknowledge they understand the above and agree to be responsible for accepting these financial risks**.

**Principal Investigator** Printed Name Signature Date

**Grant Manager** Printed Name Signature Date

**Chair** Printed Name Signature Date

***This Award Continuation Form expires one year from the end date of the award.***