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| GRANTS – PROJECT VARIATION FORM |
| **Office for Veterans** |
| OFFICIAL |

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| --- | --- | --- |
| OPP-Number: | Organisation: | |
| Contact Person: | Position: |
| Telephone: | Email: |
| Funding Program: | |
| Project Name: | |
| Total Grant Amount: | |

**Type of Variation being sought** (please indicate as applicable)

|  |  |  |
| --- | --- | --- |
| **Proposed**  **Project Dates** | new start  **/ /** | new finish |
| **Organising Personnel**  **\***List names & roles | | |
| **Number of attendees (if applicable):** | |  |
| **Budget/Funding**  \*You must provide revised budget for all grant funds | |  |
| **Item/Service** | | **Amount $ (excl. GST)** |
|  | | $ |
|  | | $ |
|  | | $ |
|  | | $ |
|  | | $ |
|  | | $ |
|  | | $ |
|  | | $ |
| **Total** | | **$** |
| **Proposed New Project Change (if applicable):** | | |
| **Other**  (Please specify) | | |

#### Reasons for proposed change to project

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#### Description of proposed change to project. How will this affect the project outcome?

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#### Will this project still meet the program objectives?

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#### CERTIFICATION

I certify that all details supplied in this Variation Form are true and correct to the best of my knowledge and that this variation is being sought with the full knowledge and agreement of the organisation management.

I understand that once approved this variation request will form part of the funding agreement with the Multicultural Affairs.

### Name: Position:

**Signature: Date:**

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#### OFFICE USE ONLY

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| --- | --- | --- | --- |
| Variation Response | | | |
| Date Variation received |  | Date approved/not approved |  |
| Date organisation advised |  | | |
| Approved by |  | | |