

CHANGES TO BUDGETED POSITIONS

ACCOUNT CODE	Number of Positions			POSITION DESCRIPTION	Percent Assigned To Project	Number of Months Assigned To Project	BUDGETED DOLLARS
	Old	Increase (Decrease)	Revised				

Submitted by: _____

Signature of LEA Superintendent or Finance Officer

Date

FOR STATE AGENCY USE ONLY		
Request Processed (Circle One):	Yes	No
_____ Signature of Federal Grant Administrator	_____ Date	

Please submit this amendment and all attachments directly to the Federal Programs Section.