

Requesting a Change – Information Requirements

Type of Change	Information Needed in Request
<i>Authorization for Change Required</i>	
Course Change	<ul style="list-style-type: none"> <input type="checkbox"/> Name and description of new course <input type="checkbox"/> Name of course being replaced (unless it is an addition) <input type="checkbox"/> Description of reasons for change/addition including how it supports the original intent and scope of the project <input type="checkbox"/> Explanation of how it affects the project budget
Instructor/Training Provider Change	<ul style="list-style-type: none"> <input type="checkbox"/> Name and qualifications of new instructor/training provider <input type="checkbox"/> Name of instructor/training provider being replace (unless it is an addition) <input type="checkbox"/> Description of reasons for change, including how it supports the original intent and scope of the project <input type="checkbox"/> Explanation of how it affects the project budget
Adjustment to a Course	<ul style="list-style-type: none"> <input type="checkbox"/> Description of changes planned for the course including reasons for change and how it supports the original intent and scope of the project. <input type="checkbox"/> Explanation of how it affects the project budget
Business Partner Change (Addition/Subtraction/Replacement)	<ul style="list-style-type: none"> <input type="checkbox"/> Description of change planned including names of partners affected <input type="checkbox"/> Explanation of reason for change <input type="checkbox"/> Explanation of how project/budget will need to change to accommodate the partner adjustment <input type="checkbox"/> Letters of commitment and partner contact information from any new partners <input type="checkbox"/> Letter of withdrawal from the project from any partner leaving the project
<i>Authorization for Change & Contract Amendment Required</i>	
End Date Extension	<ul style="list-style-type: none"> <input type="checkbox"/> Current end date and newly desired end date (End of quarter – no more than 2 years total contract) <input type="checkbox"/> Reasons for need for extension <input type="checkbox"/> Explanation for plan to complete project within the new timeline
Change between Budget Line Items	<ul style="list-style-type: none"> <input type="checkbox"/> A table showing the original grant budget in one column and the newly desired grant budget in the next column <input type="checkbox"/> A written description of the desired change <input type="checkbox"/> An explanation for the need for the change and how the change supports or does not change the original intent and scope of the project
Change in Grantee	<ul style="list-style-type: none"> <input type="checkbox"/> An explanation for the need for the change (acquisition, partner withdrawal) <input type="checkbox"/> Legal name, FEIN number and contact information for new grantee <input type="checkbox"/> Financial Viability documentation <input type="checkbox"/> Commitment letter from new grantee accepting terms of original grant and stating plans to complete the project as originally intended

Please send an email requesting your change and including the above information to WisconsinFastForward@dwd.wisconsin.gov as soon as you know you need a change.