Dear (Program Director/Leader):

This is an internal request for a no-cost extension on the following grant/contract:

- Agency project number:
- Principal Investigator name:
- Project title:
- UNO con number:
- Award period:

I would like to extend this project until (requested end date). (Then provide a clear justification statement, summary of progress to date, and timetable for completion.)

If additional information is required, please contact me by telephone at (phone number) or email at (email address). Thank you for your consideration of this request.

Sincerely,

(PI Name)
Principal Investigator
(Department Name/Address/etc.)

Cc: Department Chair/Admin. Asst.

_______________________
ORSP approval

_____________________________________
Vice President for Research and Sponsored Programs
University of New Orleans