Grant Modification



Requests February 2015

Purpose of Modification Requests

• This form in COGMS is used to request:

- Budget revisions
- Changes to project officials
- Changes in grant award period
- Modification of other grant agreements

• This form replaces the DCJ Form 4A, 4B, 4C and 4D

Note: Information on how to request a grant modification is also included in the Crime Victim Services (CVS) Grant Guide to COGMS Post Award Submissions at http://dcj.ovp.state.co.us

Modification Requests

- * One form can be used to make multiple modification requests.
- * Different types of modification requests require different types of changes to the contract.
- Completing the modification request is usually just the first step in the process to modifiying the contract.

Modification Requests (continued)

- Once OVP receives and reviews your modification request, they will determine if additional forms are needed to modify your contract and also if you need to revise your final, approved application
- Some requests, such as changing project officials, require only a general approval by OVP and no additional forms are needed

Modification Requests (continued)

- Other requests, such as changing the grant award period, require a formal modification to your contract
- * There are 3 different forms for making a formal modification (sample blank forms were included in your contract)
 - * Grant funding change letter used primarily to increase or decrease funding
 - Contract amendment used primarily for changes to goals and objectives
 - * Option letter used primarily for changing the grant award period

Note: OVP staff will let you know if a formal modification form and/or an update to your approved application is needed

Completing the form in COGMS

- Each agency has 4 modification request forms loaded into COGMS; if you need additional forms, contact your grant manager
- * To complete the Modification Request form, log in to COGMS and enter your user name and password: <u>https://g3.state.co.us/grantium/frontOffice.jsf</u>
- * If you have forgotten your user name, contact Kathy Holland at OVP at <u>kathryn.holland@state.co.us</u>. If you have forgotten your password, use the link under the *Login* button to request that your password be reset.

* As with all forms, click Submissions in the left menu bar after logging in.



 At the Submissions screen, find the Modification Request form in the left column; click on the file folder icon next to the Modification Request to open the form.

		2015 Payment Request July - Sep EXTRA 2014-SA-14-002890-02 - 2015 Payment Request July - Sep EXTRA	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Jul 1, 2014	Jun 30, 2016	Primary Applicant	1
	•	CVS_Closeout_09102014 - 2015 Payment Request Oct - Dec EXTRA 2014-SA-14-002890-02 - 2015 Payment Request Oct - Dec EXTRA	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Jul 1, 2014	Jun 30, 2016	Primary Applicant	1
		CVS_Closeout_09102014 - DCJ-13 Certification 2014-5A-14-002890-02 - DCJ-13 Certification	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Aug 19, 2013	Aug 19, 2016	Primary Applicant	1
	6	CVS_Closeout_09102014 - DCJ-16 Certification 2014-SA-14-002890-02 - DCJ-16 Certification	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Aug 19, 2013	Aug 19, 2016	Primary Applicant	1
		CVS_Closeout_09102014 - DCJ-5 Certification 2014-SA-14-002890-02 - DCJ-5 Certification	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Aug 19, 2013	Aug 19, 2016	Primary Applicant	1
-	-	CVS_Closeout_09102014 - Modification Request #1 2014-SA-14-002890-02 - Modification Request #1	Crime Victims Services Grant Program 2014 Initial Post Award Submission	Aug 19, 2013	Aug 19, 2016	Primary Applicant	1
				100456			

Contact Us

- * Upon opening the *Modification Request*, the *Project Information* screen will be displayed. This screen lists the basic information about your grant.
- * Complete the Request Prepared By and Contact Phone fields (highlighted in yellow on the screen shot in the next slide).
- * Click Save & Next at the bottom of the screen to proceed to the next section.

dkasyon	Project Information	
plicant Name: _UAT_Public_Government plicant Number:	Reference Submissions	
10754 Ject Name:	View Step	
_CVS_UAT_v2_continuation4	This list contains no items	
dification Request #1 ject Number:		
4-SA002277-21		
(UAT 2.0) Crime		
Victims Services		
Grant Program 2014	Project Information	
CVS Modification	Grantee Name: LJC_UAT_Public_Government	
Request	Project Title: LJC_CVS_UAT_v2_continuation4	
Project Information	Grant Number: 2014-SA002277-21	
Modification Request	Project Director: Alexsander Chenko	
Certification	Project Duration:	
Submission Summary	From: 03/01/2015	
	To: 12/31/2015	
	10: 12/3/1/2015	
View Applicant Profile		
Export to PDF	Submission Information	
Get PDF Viewer	* Request Prepared By:	
	* Contact Phone:	
Back to Submissions List	Submission Date: 02/21/2015	
	Save Save & Back Save & Next	
	Back Next	

At the *Modification Request* screen, indicate the type or types of modication(s) being requested. Click *Save & Next* to proceed.

ieKa	Modification Request		
lame:	* Type of modification request:		
umber:	Budget Revision 🔲 😰		
e: t 09102014	Change in Project Officials 📃		
Request #1	Change in Grant Award Period 🔲 🔶 Click on all applicable		
002890-02	Modification of Other Grant Agreements 🔲 modification request types		
me Victims vices Grant gram 2014	* Reasons for this request:		
S Modification quest			
formation ion Request on n Summary	A detailed justification for the request must be provided or the		
	request will be Save Save & Back Save & Next		
	returned/denied Back Next		
ant Profile	Check Spelling		
PDF			

e.Forms

Logout

After completing the *Modification Request*, certify that the information is correct, that backup

documentation is available and that the person authorized to submit the form is the one submitting. Click *Save & Next* to proceed.

🍐 DebbieKa	Certification
Applicant Name: LJC_DCJ_2 Applicant Number: 80193702 Project Name: CVS_Closeout_09102014 - Modification Request #1 Project Number: 2014-SA-14-002890-02	* I certify that the content of this form is accurate and can verify that the appropriate backup documentation is available onsite, if requested and will be retained for the required time as specified in the grant agreement. I, hereby, also certify that I am authorized to submit this form.
Crime Victims Services Grant Program 2014	Save & Back Save & Next
CVS Modification Request	Back Next
Project Information	
Modification Request	
Certification	
Submission Summary	

- As noted on the next slide, the final screen is the Submission Summary screen. If you have any items that have not been completed, it will state Please Complete under the Last Updated column.
- * Clicking on *Please Complete* will take you to the section that needs to be completed or corrected.
- * Once the form is completed, click the Submit button at the bottom of the screen.
- * Once the form is submitted it cannot be revised unless OVP amends it back to the grantee.

Logout



🛦 dkasyon	Submission Summary			
licant Name: UAT_Public_Government	Page	Last Up	dated	
cant Number: 754 ct Name: VS_UAT_v2_continuation4 fication Request #1 ct Number: SA002277-21	Project Information Modification Request Certification	Please Co Please Co Please Co	omplete	
UAT 2.0) Crime /ictims Services Grant Program 2014		Back Next		
CVS Modification Request		Export to PDF Get PDF Viewer		
Project Information Modification Request Certification		Submit		

View Applicant Profile

Submission Summary

Export to PDF Get PDF Viewer

REMEMBER

* The Grant Modification Request form is usually just the first step in making a change to your contract, other forms may need to be completed and the grantee will likely have to make changes to the application in COGMS. This process will be coordinated through your OVP grant manager.

Questions?

 * Please contact your OVP grant manager with questions at (303) 239-5719 or toll-free at 1-888-282-1080