

# Research Budget Revision Request

Please email to [orsp@tamuc.edu](mailto:orsp@tamuc.edu)

Researcher Name:

Department:

Title of Project:

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The following information may be entered below each section in the area provided. You may type or copy/paste your information into each section.

Keep in mind that your budget award amount will not be increased. Other lines of your budget will need to be adjusted in order to purchase additional items. Please attach a copy of your original budget.

**Purpose/Intent of Project:**

**Project objective:**

**Revision(s) to be made to the budget:**

**Why is this change needed to the original budget? (Benefits to the funded research.)**

**Will it negatively impact your research by lessening other line items?**

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**Signature of Student (if applicable)**

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**Date**

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**Signature of Faculty Advisor or Faculty Member Requesting Revision**

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**Date**

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**Signature of Provost or Vice Provost**

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**Date**

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Please submit to the Office of Research & Sponsored Programs. ([orsp@tamuc.edu](mailto:orsp@tamuc.edu))