## Community Grant variation request

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| Your organisation name: |  |
| Details of contact person: |  |
| Your project name: |  |
| Original finish date of your project: |  |
| What is the original outcome of your project: | |
|  | |
| What are the changes you need to make for your project? Please explain. | |
|  | |
| What is your proposed new actions for your project? | |
|  | |
| Proposed finish date of your project: | |
|  | |