|  |
| --- |
| **(Insert Tribe/School District Name)** |
| IGA number:  |  |  |
| Organizational unit: |  |  |
|  |  |  |
| **Budget Category** | **Approved Budget** | **Requested Budget Adjustment** | **Revised Budget (apply budget adjustment to approved budget)** |
| Personnel |  |  |  |
| Fringe Benefits |  |  |  |
| Travel & Training |  |  |  |
| Equipment |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other purchased Services |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Subtotal  |  |  |  |
| Indirect Costs (5%) |  |  |  |
| Total |  |  |  |
|  |  |  |   |
|  |
|  |  |  |  |
| Completed by: |  | Date: |  |

**Signatures**

I request approval for this budget adjustment on behalf of the (Tribal Grantee):

**Authorized Personnel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Name and Title**

***Indian Education Approval***::

Approved: \_\_\_\_\_\_\_\_ Disapproved: \_\_\_\_\_\_\_

**Education Administrator Approval**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

**General Manager Approval**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

 **General Manager**