[INSERT PI or ORA letterhead]

**CHANGE IN SCOPE**

February 17, 2019

GMS Name

Title

Address/Email

**NIH GRANT NUMBER**

**PI NAME(s)**

Dear Mr./Ms./Dr. ----------:

We are writing to you to request permission to change the scope on this grant effective [DATE].

[Provide a DETAILED description of and justification for the proposed CHANGE IN SCOPE.

Examples:

* Change in the type of animal work or the species of animal,
* Adding human subjects or a change in procedures and/or patient population,
* Adding a subaward or third-party to provide services,
* Any significant rebugeting.

Also indicate what budget categories, if any, will be impacted by the change. Provide a revised budget and justification showing these changes.]

Thank you for your consideration of our request. Please don’t hesitate to contact us if you require additional information.

Sincerely,

PI NAME Authorized Official Name

PI TITLE Authorized Official Title

Johns Hopkins University Office of Research Administration

School of Medicine Phone/Email

Phone/Email

**\*\*\*\*UPDATE THE HIGHTLIGHTED FIELDS AND DON’T FORGET TO REMOVE THE HIGHLIGHTING (AND THIS NOTE), BEFORE SENDING TO PI FOR SIGNATURE\*\*\*\***