**New Horizons No Cost Extension Request Form**

Please submit completed form to projects@research.ie

**Details**

|  |  |
| --- | --- |
| **New Horizons Strand** |  |
| **Year of Award** |  |
| **Project Title** |  |
| **Lead PI Award Holder** |  |
| **Co-PI Award Holder (where applicable)** |  |
| **Irish Research Body** |  |
| **Commencement Date** |  |
| **Current end date** |  |
| **New proposed end date** |  |
| **Number of months of proposed extension** |  |

**Justification for No Cost Extension**

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| --- |
| **Please explain in detail the reason for requesting an extension to your grant.**  |
|  |

**Signatures**

Principal Investigator (s)

|  |  |
| --- | --- |
| Signature of Principal Investigator\* |  |
| Print Name |  |
| Date |  |

|  |  |
| --- | --- |
| Signature of Co- Principal Investigator\* (where applicable) |  |
| Print Name |  |
| Date |  |

Irish Research Body Representative (Research/Finance Office or Equivalent)

|  |  |
| --- | --- |
| Signature of VP/Dean of Research/Director of Research/Authorised Signatory\* |  |
| Print Name |  |
| Date |  |