

December 1, 2020

Ms. Principal Investigator Nearby Hospital

24 Ring Road

Providence, RI 02903

Dear Ms. Investigator,

Brown University requests approval to carry over funds for {PI NAME’s} {subaward # XXXX *and/or* ( Award # XXXX)}, {“ PROJECT TITLE”} from the period, x/xx/ 20xx - x/xx/ 20xx in the amount of {$X.XX} total costs.

Add explanation for the unobligated balance - Why were the funds not spent in the past year?

Describe a plan for expenditure, including a description of activities to be carried out during the carryover period, and how the activities relate to the aims of the project.

Example: *The funds will be used to support the work of Dr. X, a postdoctoral research associate, who has been analyzing qualitative data collected as part of this project (research activity). A portion of this funding will also be used to support John Doe (data manager), who will be working with Dr. X.*

Answer as applicable: Are there new costs that were previously unforeseen? How will the work be impacted if the funds are not carried over?

Do not hesitate to contact the undersigned with any questions you may have. Your consideration of this request is greatly appreciated.

Sincerely,

Jane Dee, Ph. D.

Principal Investigator

XXX

Assistant/Associate/ Director,

Office of Sponsored Projects *or* Biomed Research Administration