Logo, company name

Description automatically generatedInstructions for completing the

Third Quarter Modification Request Form

Definitions and Allowable Use Guidelines are included on the second tab of the spreadsheet.

1. Enter the name of your Consortium on Line 14.
2. Click the checkbox for all that apply in Lines 18, 19, and 20.
3. Enter your current total grant amount in Line 25.
4. Enter the new total grant amount in Line 27.
5. Enter the difference between the amounts in Line 29.

In the table for Lines 34 through 45:

1. Enter your current amounts for Program Costs in the first column.
2. Enter the amount that should be changed for each Program Cost in the second column.
3. The third column and Program Costs Subtotal row should auto-populate with the correct amounts for the new funding level in each category.
4. Adjust your Local Matching Funds. Local Matching Funds should equal 50% of the new grant total.

Save your form as **<Consortium Name> Third Quarter Budget Modification 2021-22.**

Email the completed form to [YA@dwd.wisconsin.gov](mailto:YA@dwd.wisconsin.gov).