

Einstein sample request letter- 2<sup>nd</sup> NCE- No change in scope

*Today's Date*

*Name of the Grant Management Specialist (GMS)*

*National Institutes of Health*

*Address*

*Address*

*Email address of GMS*

Re. 2<sup>nd</sup> NCE Request for:

Grant #: \_\_\_\_\_

Title: \_\_\_\_\_

PI: \_\_\_\_\_

Dear GMS,

1. *Amount of time requested-* I am writing to request a second no cost extension for x# of months through xx/xx/xx date.
2. *A brief progress report that communicates the scientific progress made after the last RPPR was submitted-* Since the last RPPR was submitted on xx/xx/xxxx date, we have been able to complete XYZ.
3. *Description of the project activities that require support-* However, more time is needed to complete XYZ.
4. *Why the project could not be completed-* We were not able to complete this by the originally approved project end date because of XYZ.
5. *Dollar amount remaining-* There is an estimated unobligated balance of \$x total costs (which includes \$y direct cost and \$z indirect costs) as of xx/xx/xxxx date, which are available to support the remaining activities.

This request will not result in a change in scope or affect the specific aims of the project.

We appreciate your consideration of this request as well as your continued support on this grant.

Should you have any programmatic questions, please contact the Principal Investigator/Program Director XXXX at XXX-XXX-XXXX or email [XXX@einsteinmed.edu](mailto:XXX@einsteinmed.edu).

If you have any financial questions, please contact the financial officer, Suzanne Locke, at 718-430-2688. Please email your approval to [suzanne.locke@einsteinmed.edu](mailto:suzanne.locke@einsteinmed.edu) or mail to Albert Einstein College of Medicine, 1300 Morris Park Ave., Belfer/1108E, Bronx, NY 10461.

*Sincerely,*

\_\_\_\_\_  
*XXXXXX*  
*Principal Investigator/Program Director*

\_\_\_\_\_  
*Suzanne Locke*  
*Director – Research Finance*

*Cc: PO Name*

Be sure to include the following attachments:

- o Budget and justification in [PHS 2590 Detailed Budget Page Form Page 2](#) reflecting the requested direct costs. (If sponsor specifies, you may use PHS398 or SF424)
- o Provide an F&A breakdown in the form of the [PHS 2590 Form Page 6 checklist](#).
- o If requested, attach Einstein's federally negotiated rate agreement.
- o If requested, attach the FFR.