



Social Sciences and Humanities
Research Council of Canada

Conseil de recherches en
sciences humaines du Canada

Canada

SSHRC Exchange & SSHRC Explore

Budget Revision Form

BE READY.


Lethbridge
College



THIS DOCUMENT IS FOR REFERENCE ONLY. THE WEBFORM VERSION MUST BE USED FOR ALL SUBMISSIONS

Instructions

Budget revisions are allowed if they:

- do not exceed the current account balance.
- meet the Tri-Agency and Lethbridge College criteria of eligible expenses.
- do not significantly change or alter the project as approved by the SSHRC Selection Committee.
- have the approval of the Manager, Applied Research Operations and the CARIE Financial Analyst (FA).

It is strongly advised that the applicant consult with the Manager, Applied Research Operations before completing this form.

Researcher Information

Name of Principal Investigator (P.I.) and Co-P.I. (if applicable)	
School or Unit of P.I. and Co-P.I. (if applicable)	
Project Title	
Original Budget Amount	
Budget Code	

Please provide a detailed rationale for the revision:

[Empty box for providing a detailed rationale for the revision]

For Reference Only

Revised Budget Request

Please use the [SSHRC Guidelines](#) as a guide for creating / revising your budget. Once approved, this form will become the new budget for your SSHRC Exchange or SSHRC Explore.

Category	Budget Item(s)	Object Code	Cost (Tax-inclusive)
Salaries* <i>(Student & Professional)</i> <i>*course release is NOT eligible</i>			
Materials & Supplies			
Equipment			
Travel <i>(Collaboration & Dissemination)</i>			
Others <i>(Please Specify)</i>			
TOTAL			\$ 0.00

Budget Justification & Explanation: Provide a detailed justification for each budget item and relate it to the objectives and requirements of the project. Highlight any changes to the originally approved budget.

For Reference Only

Researcher Signature(s)

I/We hereby accept the terms and conditions as outlined in the [SSHRC Explore and Exchange Guidelines](#).

P.I.	Co-P.I.
Date:	Date:
Name:	Name:
Signature:	Signature:

Approvals

Manager, Applied Research Operations
Date:
Name:
Signature
CARIE Financial Analyst
Date:
Name:
Signature

FOR REFERENCE