This form represents a variation request in scope and project deliverables. Please complete all fields and provide attachments.

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| **[A] Variation Type** |

Scope  Timing *(If a Timing Variation is needed as a result of variation in scope, please tick box and complete sections D and E)*

|  |  |  |
| --- | --- | --- |
| **[B] Project Details** | | |
| **Organisation name** | Organisation Name | |
| **Organisation contact** | Name Title Email Address Contact Number | |
| **Project name** | Exact name as per Funding Agreement | **Department use only** |
| **Activity schedule number** | OPP-Number | Click here to enter text |
| **Funding year** | YYYY-YYYY | Click here to enter text |
| **Funding program** | Select from dropdown | Click here to enter text |
| **Funding program (Other)** | If other, enter details. Otherwise N/A | Click here to enter text |
| **Approved grant amount** | $ Grant Amount | Click here to enter text |

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| **[C] Variation Details** |
| **What is the current scope of the project (as outlined in the funding agreement)?**  Click here to enter text |
| **What are the proposed change/s in scope? Outline if your proposal is an increase or decrease in scope?**  Click here to enter text |
| **What has led to the proposed change/s in scope?**  Click here to enter text |
| **If you are seeking to reduce scope due to cost, have you explored other avenues/funding sources?**  Click here to enter text |
| **What other actions have been taken to avoid any change/s in scope?**  Click here to enter text |
| **What consultation has been undertaken with potential beneficiaries in response to the proposed change/s in scope?**  Click here to enter text |
| **Will the project outcomes be impacted by the change/s in scope?**  Click here to enter text |

**Is a timing variation required due to scope variation?**   Yes *(complete Section D and E)*  No *(proceed to Section F)*

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| --- | --- | --- |
| **[D] Project Completion Details** | | |
| **Current completion date** | Click here to enter a date | Click here to enter text |
| **Requested completion date** | Click here to enter a date | Click here to enter text |
| **No. of previous variations** | Select from dropdown | Click here to enter text |

|  |  |  |
| --- | --- | --- |
| **[E] Project Milestone Details** | | |
| **Deliverable** | **Current due date** | **Proposed due date** |
| Select from dropdown | Select date | Select date |
| Select from dropdown | Select date | Select date |
| Select from dropdown | Select date | Select date |
| Select from dropdown | Select date | Select date |
| **If other:** Click here to enter text | Select date | Select date |

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| **[F] Supporting Documents** |

Please ensure the following are attached to your variation request:

Updated Costings/QS

Updated Schematic Plans

Letters from users/clubs supporting scope changes

Updated Project Management Framework *(if Timing Variation is also required)*

Other Supporting Documentation: Please specify here

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| **[G] Declaration & Signature** |

I certify that the contents of this form, including all attachments are true and correct to the best of my   
knowledge. By signing below I acknowledge this variation will be legally binding once executed by all parties.

Sport and Recreation Victoria reserve the right to undertake further negotiations with Council regarding this request.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Organisation Project Representative** | | | **Signature** |  | | **Name** |  | | **Position** |  | | **Date** | Select date | | |  |  | | --- | --- | | **Organisation Executive Officer** | | | **Signature** |  | | **Name** |  | | **Position** |  | | **Date** | Select date | |

**NOTE - IMPORTANT:**

**Please ensure an appropriately authorised officer (CEO, Director, Senior Manager) signs this form on behalf of Council.**