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## Preview Form

This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.

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## Contact Information

- |   |               |
|---|---------------|
| <b>* Salutation</b><br>(Text)(100 character maximum)              | Instructions: |
| <b>* First Name</b><br>(Text)(40 character maximum)               | Instructions: |
| <b>* Last Name</b><br>(Text)(40 character maximum)                | Instructions: |
| <b>Credit Union Contact Title</b><br>(Text)(50 character maximum) | Instructions: |
| <b>* Telephone</b><br>(Text)(30 character maximum)                | Instructions: |
| <b>* E-mail Address</b><br>(Text)(100 character maximum)          | Instructions: |
| <b>* Contact Type</b><br>(Single-Select List)                     | Instructions: |

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## Grant Award Details

Please review the details of your grant award then proceed to the next page to complete your extension request.

**Award Number**

(Text)(20 character maximum)

Instructions:

**Grant Commitment Number**

(Text)(500 character maximum)

Instructions:

**Grant Initiative**

(Single-Select List)

- Training
- Digital Services & Cybersecurity
- Small LICU Mentoring
- Consumer Financial Protection
- MDI Capacity Building
- Underserved Outreach
- Minority Depository Institution Mentoring
- Natural Disaster Relief
- Newly Chartered Credit Union
- Other Emergency Events
- Impact Through Innovation
- Small Credit Union Partnership

Instructions:

**Grant Amount**

(Currency)(20 character maximum)

Instructions:

- 

**Performance Period Start Date**

(Date)

Instructions:

**Performance Period End Date**

(Date)

Instructions:

**Performance Period 2 Start Date**

(Date)

Instructions:

**Performance Period 2 End Date**

(Date)

Instructions:

**Performance Period 3 Start Date**

(Date)

Instructions:

**Performance Period 3 End Date**

(Date)

Instructions:

**Current Grant Expiration Date**

(Date)

Instructions:

**Project Title**

(Text)(255 character maximum)

Instructions:

**Training Project Activities**

(Checkbox List)

- Continuity and Succession Planning
- Leadership Training
- Staff Development

Instructions:

**Digital Services & Cybersecurity Project Activities**

(Checkbox List)

- Implementation of Mobile/Online Banking Features
- Remote Workforce Management and Solutions
- Strengthen Cybersecurity

Instructions:

- The grant was awarded to complete the following activities:

**Mentoring Project**

(Checkbox List)

- Credit Union Growth and Expansion
- Improved Management and Operations
- Increased Credit Union Capabilities
- Other (please specify)

Instructions:

- The grant was awarded to complete the following activities:

**Other Mentoring Project:**

(User-Defined List)

Instructions:

**Underserved Outreach Project Objective**

(Checkbox List)

- New or Expanded Outreach Efforts
- New or Expanded Financial Education Programs
- New or Expanded Financial Products or Services

Instructions:

- The grant was awarded to complete the following activities:

# Grant Extension Request

## Important

This form must be submitted by credit unions requesting to extend the grant expiration date to complete projects beyond the award's performance period end date. Grant extensions provide additional time for credit unions that have experienced challenges to complete their project and receive reimbursement for all project expenses incurred.

**Extension requests must be submitted no later than 10 days prior to the current grant expiration date.**

Once a final decision has been made on the extension, the NCUA will notify the credit union via email sent to the designated contact persons. If approved, you will notice a change in the "Current Grant Expiration Date" in forms associated with this award. Please note the performance period start and end date will not change from the dates stated in the original notice of grant approval. The reimbursement request due date will be updated to 30 days after the new grant expiration date.

If you have any questions, contact the Grants and Loans Team at [CUREApps@ncua.gov](mailto:CUREApps@ncua.gov).

### \* Current Expiration Date

(Date)

Instructions:

### \* Requested Commitment Expiration Date

(Date)

Instructions:

- Enter the date by which you expect to complete the project.

Instructions:

### \* Project Status

(Paragraph)(4000 character maximum)

- Describe any project activities completed as of the date of the extension request. Include an estimated percent of the project completed as of the date of the extension request.

Instructions:

### \* Challenges Encountered

(Paragraph)(4000 character maximum)

- Describe the circumstances and challenges that have delayed the project.

Instructions:

**\* Remaining Work**

(Paragraph)(4000 character maximum)

- Discuss the remaining tasks that must be performed to complete the project. Justify the length of time required to complete the project.

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[CUREAPPS@ncua.gov](mailto:CUREAPPS@ncua.gov)

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National Credit Union Administration, 1775 Duke Street, Alexandria, VA 22314-3428

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