

Completing a Budget Change Request (SF-424)

Learn how to create, fill out, and submit a Budget Change Request Form (Financial Report SF-424) for your DoWEA grant.

Reporting Access by Role

Project directors and financial staff members can create and submit SF-424 forms through the *Financial Reporting Dashboard* on the DoWEA Evaluation Technical Assistance Center (ETAC) website. Other team members within a grantee school district can view, but not edit, financial forms. Evaluators do not have access to the *Financial Reporting Dashboard*.

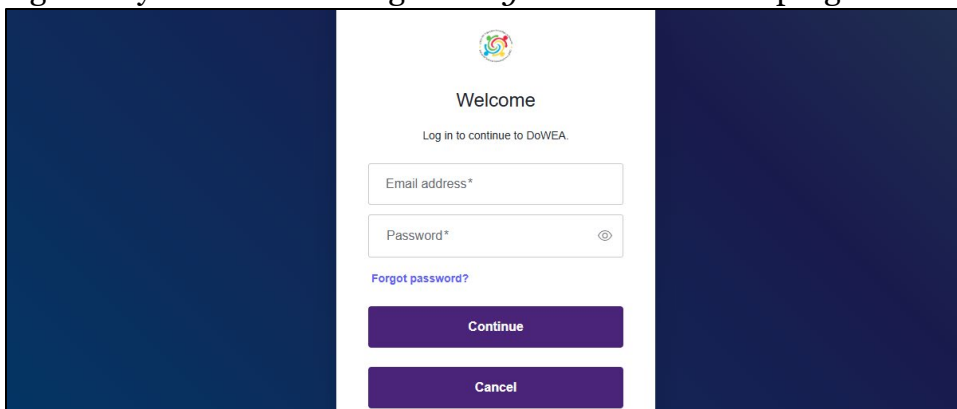
Creating a New SF-424 Form

Use the following steps to create a new SF-424 form or access an existing draft:

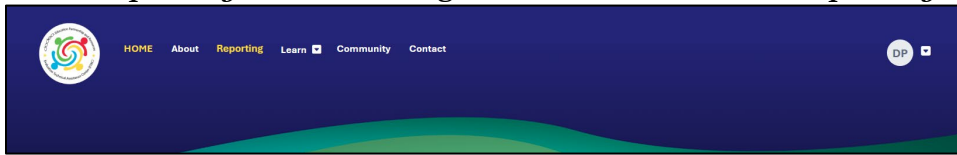
1. Go to the [ETAC homepage](#).



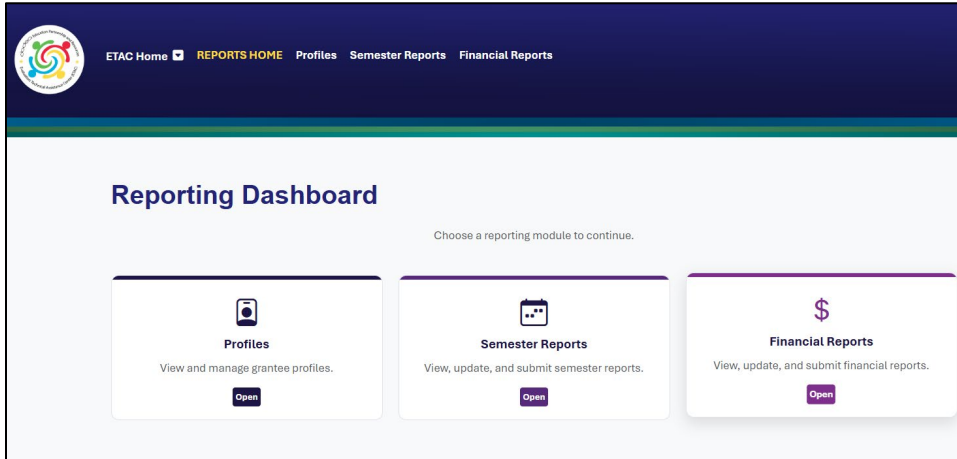
2. Sign into your account using the *Login* button in the top right corner of the homepage.



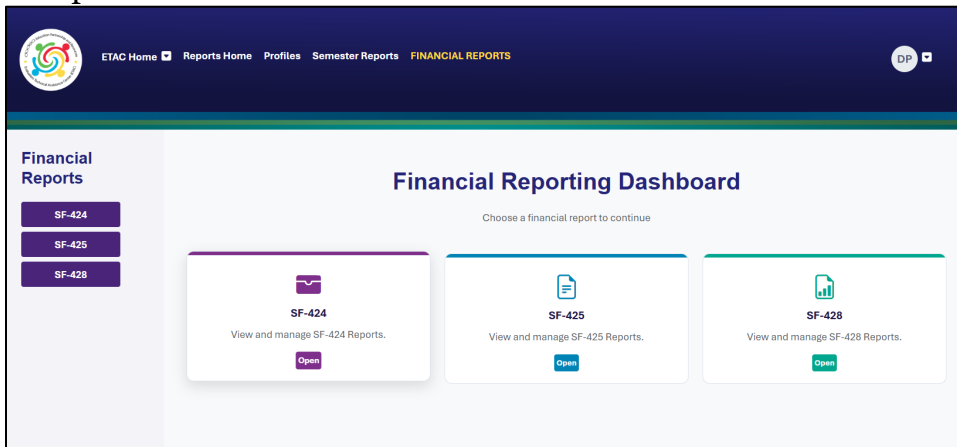
3. Select *Reporting* from the navigation menu to enter the *Reporting Dashboard*.



4. Open the *Financial Reports* card to enter the *Financial Reporting Dashboard*.



5. Select *SF-424* from the side menu or open the corresponding dashboard card. Within this category, you will find a list of all grantees, grant projects, and grant years with which your user profile is associated.



- Find the desired grantee and grant year using the search bar and *Award Year* drop-down menu.

FEDERAL GRANT ID	GRANTEE NAME	PROJECT NAME	AWARD YEAR	PROGRAM	PD	ACTION
FG-1001	Grantee ABC School District	Project Alpha	2025	MCASP	Alice Brown	View

- Select the *View* button to access all SF-424 Reports for the selected grantee and grant year.

FEDERAL GRANT ID	GRANTEE NAME	PROJECT NAME	AWARD YEAR	PROGRAM	PD	ACTION
FG-1001	Grantee ABC School District	Project Alpha	2025	MCASP	Alice Brown	View
FG-1002	Grantee DEF School District	Project Bravo	2025	WLARP	Daniel Evans	View

- Select the *+New SF-424* button in the upper right corner to start a new report. To edit an existing SF-424 draft, find the desired form in the table and select *Edit*.

SF424 ID	LEGAL NAME	UEI	FEDERAL AWARD ID	CREATED	STATUS	ACTION
25	Grantee DEF School District	B9C0D1E2F3G4VK	FG-1002	12/05/2025 05:04 PM EST	Submitted	View Print
23	Grantee DEF School District	B9C0D1E2F3G4	FG-1002	12/02/2025 10:56 AM EST	Draft	Edit View

Filling Out the Form

General Notes

Prefilled Items: For your convenience and to support reporting accuracy, some lines have been prefilled based on your user profile and the profile of the grantee and grant year for which you are reporting. If you need assistance updating a prefilled line that is locked for editing, contact ETAC at support@dodeagrants.org.

Mandatory Sections: As you complete the form, note that all items marked with a red asterisk are mandatory and must be completed in order to save, move through, and submit the form. If you click the *Next* button before completing all mandatory fields on a given page, an error message will prompt you to provide the missing information before moving forward.



Saving Your Work: To save the request as a draft, complete all mandatory information on the first page and click the *Next* button in the bottom right corner of the form. After this initial save, you can exit and return to editing the form as needed before submitting.

Note: Clicking the *Next* button saves all information entered on the current page of the form. If you want to exit and return to the form later, be sure to click *Next* before exiting to save your most recent entries.

Page 1 (Items 1-7)

1.a-1.d. These lines are prefilled as follows:

- **1.a. Type of Submission:** *Funding Request*
- **1.b. Frequency:** *Annual*
- **1.c. The Consolidated Application/Plan/Funding Request:** *Yes*
- **1.d. Version:** *Initial*

2. Date Received: Prefills with the date the form was submitted.

3. Applicant Identifier: Left empty and locked for editing because not applicable.

4.a. Federal Entry Identifier: Prefills automatically when the Unique Entity Identifier (UEI) is entered in line 7.c.



4.b. Federal Award Identifier: Prefilled with the Federal Grant Award number from the *Grantee Profile*.

2. Date Received:
mm/dd/yyyy

3. Applicant Identifier:

4a. Federal Entity Identifier:

4b. Federal Award Identifier:
FG-1002

5-6. State Only: Left empty and locked for editing because not applicable.

STATE USE ONLY:

5. Date Received by State:
mm/dd/yyyy

6. State Application Identifier:

7.a-f. Applicant Information: Fill out all required sections marked with red asterisks.

Note: The point of contact entered in 7.f. should be the designated project director or the financial staff member for the grant project.

7. APPLICANT INFORMATION

a. Legal Name: *
Test Grantee

b. Employer/Taxpayer Identification Number (EIN/TIN): *
1111111111

c. UEI: *
B9C0D1E2F3G4

d. Address
Street1: *
Test St
Street2:
Test St
City: *
test city
County / Parish:
Florida
Zip / Postal Code: *
11111
State: *
Arizona
Province:
Country:
United States

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this submission:

Prefix:
Will

First Name: *
Middle Name:
E

Last Name: *
Southard

Suffix:
Title: *
Test

Organizational Affiliation:
Test Org

Telephone Number: *
1111111111

Fax Number:

Email: *
wsouthard@seiservices.com

Save and Continue: Click the *Next* button to save the form as a draft and proceed to the next page.



Page 2 (Items 8-12)

8.a-b. Type of Applicant: Prefilled with *G: Independent School District*. The additional description line is not necessary and is therefore locked for editing.

9. Name of Federal Agency: Prefilled with *DoWEA*.

10.a. Assistance Listing Number: Prefilled with *12.556*, which is the Federal Domestic Assistance Number for DoWEA grants.

10.b. Assistance Listing Title: Select the appropriate grant type (MCASP or WLARP) from the drop-down menu.

11. Descriptive Title of Applicant's Project: Enter the official title of your grant project as listed in your *Grantee Profile*.

12: Areas Affected by Funding: Provide a general description in the field provided.

Save and Continue: Click the *Next* button to save your work on the current page and proceed to the next page.



Page 3 (Items 13-16)

13. Congressional Districts Of:

- **13.a. Applicant:** Enter the grantee's congressional district.
- **13.b. Program/Project:** Enter the grant project name.

14.a-b. Funding Period: Enter the start and end dates of the funding period for which you are submitting a request using the calendar picker or by type in MM/DD/YYYY format.

15. Estimated Funding:

- **15.a. Federal (\$):** Enter the full amount of the grant award.
- **15.b. Match (\$):** This line is optional and may remain blank.

16. Is Submission Subject to Review by State Under Executive Order 12372 Process?:

- Select the option that best reflects the state review status of your submission. For most grantees, this will be option A.
- If you selected option A, enter the corresponding date in the line below using the calendar picker or typing in MM/DD/YYYY format.

Save and Continue: Click the *Next* button to save your work on the current page and proceed to the next page.



Page 4 (Items 17-18)

17. Is the Applicant Delinquent on Any Federal Debt?: If you select *Yes*, be sure to also provide an explanation in the corresponding text field at the bottom of the next page.

SF-424 APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY (Page 4)

17. Is The Applicant Delinquent On Any Federal Debt? *

Yes

No

18. Electronic Signature: Complete the electronic signature certification in your capacity as the Authorized Certifying Official.

- **Certification Statement:** Read the certification statement and select ****I Agree****.

18. By signing this application, I certify... *

By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

**** I Agree ****

- **Authorized Representative:** Enter your full name, title, contact information, and signature. Note that the submission date will be added automatically when you submit the form.

Authorized Representative:

Prefix: Mr.

First Name: * David

Middle Name:

Last Name: * Evans

Suffix: Sr.

Title: * Lead STEM Coordinator

Save and Continue: Click the *Next* button to save your work on the current page and proceed to the next page.



Page 5 (Consolidated Application/Plan/Funding Request Explanation)

Date, School District, Award Year, and Award Number, Project Title, Project Director, and Total Award Amount: Prefilled based on information associated with your entries on earlier pages of the form. Contact ETAC at support@dodeagrants.org if any of this information appears incorrect.

SF-424

Consolidated Application/Plan/Funding Request Explanation:

Date	School District	Award Year	Award Number
mm/dd/yyyy	Test Grantee 2023	2023	HE1254-23-1-9999
Project Title	Project Director	Total Award Amount	
Test Title	PD Dod	\$500,000	

1. Summary of changes to be made upon approval *

move \$	1234.00	From	Other	TO	Contractual
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1. Summary of changes to be made upon approval:

- **Move \$:** For each row, enter the dollar amount you are requesting to move from one budget category to another.
- **From:** For each row, use the drop-down menu to select the budget category from which you are requesting to move the funds.
- **To:** For each line, use the drop-down menu to select the budget category to which you are requesting to move funds.
- **Repeat:** Complete as many rows as needed for your request.

1. Summary of changes to be made upon approval *

move \$	8990.00	From	Contractual	TO	Travel
move \$		From	- None -	TO	- None -
move \$		From	- None -	TO	- None -
move \$		From	- None -	TO	- None -
move \$		From	- None -	TO	- None -
move \$		From	- None -	TO	- None -
move \$		From	- None -	TO	- None -

2. Provide complete details of how the re-allocation of funds will affect your project (identify the goals/strategies affected):

Enter your explanation in the field provided.

2. Provide complete details of how the re-allocation of funds will affect your project (identify the goals/strategies affected) *

Explanation required

3. Specify how the re-allocated funds amongst budget categories will be utilized:

Enter your explanation in the field provided.

3. Specify how the re-allocated funds amongst budget categories will be utilized *

Explanation required



Applicant Federal Debt Delinquency Explanation: If you answered *Yes* to *Question 17* on the previous page, add your explanation here.

Applicant Federal Debt Delinquency Explanation:

Explanation required if you answered "Yes" to Question 17

***Incomplete/none specific details will result in denial/resubmission; all portions of this form must be completed to avoid rejection.

[-- Previous](#)

[Next -->](#)

Save and Continue: Click the *Next* button to save your work on the current page and proceed to the next page.

Page 6 (SF-424A — Budget Information [Non-Construction Programs])

General Notes:

- The budget line cells for *Section A* and *Section B* only accept values and negative values (such as “100” or “-100”). Do not enter letters, or symbols such as dollar (\$) or plus (+) symbols in these cells.
- Totals and any non-applicable cells are grayed out and locked to prevent accidental entry.
- Totals update automatically when you click the *Next* button.
- If you want to calculate totals before moving to the next section, click the *Calculate and View Totals* button at the bottom of the page.

[-- Previous](#)

[Calculate and view totals](#)

[Next -->](#)

Section A - Budget Summary: Enter budget information in the first line; this is the only required line in this section.

- **Cell 1.a.:** Prefills from *10.b.* and is locked for editing.
- **Cell 1.b.:** Prefills from *10.a.* and is locked for editing.

Financial Reports

SF-424

SF-425

SF-428

SF-424A — Budget Information (Non-Construction Programs)

Fields in dollars accept numbers only; totals update automatically on Next.

SECTION A — BUDGET SUMMARY

GRANT PROGRAM FUNCTION OR ACTIVITY (A)	ASSISTANCE LISTING NUMBER (B)	ESTIMATED UNOBLIGATED FUNDS		NEW OR REVISED BUDGET		
		(C) FEDERAL	(D) NON-FEDERAL	(E) FEDERAL	(F) NON-FEDERAL	(G) TOTAL
WLARP	12.556	8.00	9.00	10.00	11.00	21.00
						0.00
						0.00
						0.00
Totals		8.00	9.00	10.00	11.00	21.00



Section B - Budget Categories: Enter the appropriate budget information for each field.

- **Column 1 (Grant Program, Function or Activity):** Prefills from *Cell 1.a. of Section A.*
- **Column 2 (Amount to be increased/decreased):** For each applicable budget category, enter the amount to be added or subtracted. Use a minus (-) sign to denote decreases. For example, to decrease the amount by \$500, enter “-500”.
- **Columns 3-4:** Left empty and locked as they are not applicable.

SECTION B — BUDGET CATEGORIES					
E. OBJECT CLASS CATEGORIES	GRANT PROGRAM, FUNCTION OR ACTIVITY				TOTAL (5)
	(1) MCASP	(2) Amounts to be Increased/Decreased	(3)	(4)	
A. PERSONNEL	0.00	0.00	0.00	0.00	0.00
B. FRINGE BENEFITS	0.00	0.00	0.00	0.00	0.00
C. TRAVEL	0.00	0.00	0.00	0.00	0.00
D. EQUIPMENT	0.00	0.00	0.00	0.00	0.00
E. SUPPLIES	0.00	0.00	0.00	0.00	0.00
F. CONTRACTUAL	0.00	0.00	0.00	0.00	0.00
G. CONSTRUCTION	0.00	0.00	0.00	0.00	0.00
H. OTHER	0.00	0.00	0.00	0.00	0.00
I. TOTAL DIRECT CHARGES (SUM OF 6A-6H)	0.00	0.00	0.00	0.00	0.00
J. INDIRECT CHARGES	0.00	0.00	0.00	0.00	0.00
K. TOTALS (SUM OF 6I AND 6J)	0.00	0.00	0.00	0.00	0.00

Sections C-F: Left empty and locked as they are not applicable.

Save and Continue: Click the *Next* button to save your work on the current page and proceed to the next page.



Submitting the Form

Page 7 (SF-424 Application Approval)

Current Status: This section displays the status of the form (currently *draft*) and records the username or email address of the person who last saved the form. The status updates when the form is submitted.

Change Status: Click the *Submit for Approval* button once you have checked over your entries and are ready to send the completed form to the DoWEA program team for review and approval.

Note: Clicking *Submit for Approval* will lock the form for further editing and send it to the DoWEA program team. You cannot retract or edit a form after it has been submitted. Forms you create are not visible to the DoWEA program team until they are submitted.

Status History: After you click *Submit for Approval*, the status history will update with the timestamp of your submission, the new status, and the person who made the change. A new *Timestamp* row appears for each new status through which the form passes (*Draft*, *Submitted*, *Rejected*, *Resubmitted*, etc.).

CHANGED ON	OLD STATUS	NEW STATUS	CHANGED BY	REASON
12/12/2025 01:02 PM EST	Draft	Submitted	dodea-pd@seiservices.com	



Next Steps

Update a Submitted Report: After submitting a report, if you need to make an update, please contact ETAC at support@dodeagrants.org well ahead of the annual reporting deadline.

Note: Making updates involves returning a submitted form to *Draft* status. After making your updates, you will need to resubmit your form.

View or Print Your Report: Return to the *SF-424* area of the *Financial Reporting Dashboard* and use the filters to locate your report. Use the corresponding buttons to *View* the report, or *Print* a copy for your records.

Check Request Status: The submitter will receive an email notification when the DoWEA program team either approves or rejects the submitted request. To view details about the status change, use the filters in the *SF-424* area of the *Financial Reporting Dashboard* to locate the report. Then, click on the *Status* button (*Submitted*, *Approved*, *Rejected*, etc.) to view the *Status History* table.

SF424 ID	LEGAL NAME	UEI	FEDERAL AWARD ID	CREATED	STATUS	View	Print
25	Grantee DEF School District	B9C0D1E2F3G4VK	FG-1002	12/05/2025 05:04 PM EST	Submitted	View	Print
23	Grantee DEF School District	B9C0D1E2F3G4	FG-1002	12/02/2025 10:56 AM EST	Submitted	View	Print
21	Grantee DEF School District	8237	FG-1002	12/02/2025 10:51 AM EST	Submitted	View	Print
20	Grantee DEF School District	8237	1111	12/01/2025 06:15 PM EST	Approved	View	Print

Note: The DoWEA program team has 30 days to review budget change requests. If your request is time sensitive, reach out to the DoWEA program team directly at dodea.grants@dodea.edu.



Complete Revisions and Resubmit (if needed): In the event the DoWEA program team does not approve the form as-is, follow the directions provided in the *Reason* column of the *Status History* table to revise and resubmit the form.

18	Grantee DEF School District	B9C0D1E2F3G4	FG-1002	11/25/2025 06:28 AM EST	Rejected	Edit	View
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Status History				
CHANGED ON	OLD STATUS	NEW STATUS	CHANGED BY	REASON
11/25/2025 06:35 AM EST	Submitted	Rejected	dodea-admin@seiservices.com	Application incomplete
11/25/2025 06:34 AM EST	Draft	Submitted	dodea-pd@seiservices.com	

Additional Guidance

Need support with another aspect of the *Financial Reporting Dashboard* or a different type of financial report? These articles can help:

- [Navigating the Financial Reporting Dashboard](#)
- [Annual Federal Financial Report \(SF-425\)](#)
- [Tangible Personal Property Report \(SF-428\)](#)