**Emergency Assistance for Non-Public Schools (EANS I)**

Change Request Template

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| ***Instructions:*** *Please fill out the specified information below to indicate the school information and contact information. Upon completion of this form, please email this file to* *EANS@KSDE.org* *with the subject "[Building #] Kansas EANS I Change Request” (e.g., [1234] Kansas EANS I Change Request).* |
| Building number | School name | Primary contact name | Primary contact email | Primary contact phone number |
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| ***Instructions:*** *Please fill out the specified information below in relation to the requested change(s), dedicating one row per change request. Please do not include information in the “Requested total value” column. The EANS I change request process is intended for minor adjustments to previously approved products and services to better address a current COVID need. The EANS I change request process is not intended for new requests that have not been previously approved for the Kansas EANS I program; such requests will be deferred to EANS II.* |

| **Request ID** *The request ID can be found in the EANS I Determination document the school received from KSDE* | **Change requested and rationale for change requested***Please describe what specific change the school would like to request (e.g., change in product brand, increased salary, reduced quantity, etc.) and the rationale for the change* | **Original approved value ($)** | **Requested total value ($)***(For KSDE use only)* | **Other comments** *Please provide any additional information not captured in the previous columns* |
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