

**TYLA LOCAL AFFILIATES GRANTS PROGRAM
GRANT EXTENSION REQUEST**

Form must be received in the TYLA office by 5:00pm, Tuesday May 5, 2020
A separate form must be completed for each grant extension requested.

Name of Local Affiliate: _____

Title of grant project: _____

Contact Name: _____

Address: _____

Phone: _____ **E-mail:** _____

Total Grant Awarded: _____ **Requested Date to Report:** _____

(Specify the date by which you will submit your grant report.)

1. **Status of project:** *(Explain why project has not been completed and give a timeline for completing the project)*

2. **List prior extensions requested and approved, if any for this grant:**

Approved by: _____ **Date:** _____

Current Local Affiliate President

Deliver this form by **5:00pm, Tuesday, May 5, 2020**, to: **Texas Young Lawyers Association
Local Affiliates Grants Program
1414 Colorado, 4th Floor
Austin, Texas 78701
mpalacios@texasbar.com
Fax: 512-427-4280**