Master University Agreement Task Work Order Amendment Request

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| Contract-TWO #  | Amendment #  |
| Title:  |
| Start Date:  | End Date:  |
| Project Manager: | Principal Investigator: |

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| Additional TimeRequest for additional time for completion of services to mm/dd/yyyy.Justification: |

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| Change to funding:\_\_\_\_\_ increase project amount by $\_ \_­­\_\_\_\_\_ decrease project amount by $­\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_ rebudget Justification: *Attach a budget sheet for the request change.­* |

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| Change in scopeDescribe the change being requested:Justification:*Attach a revised scope of service and a revised project schedule.* |

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| Other modifications:\_\_\_\_\_ Change of principal investigator to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Change of title to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Requestor (provide contact information): |

Note: Requests will not be processed without written FDOT project manager approval. Requested modifications must officially be processed as an amendment signed by the Research Center manager and the authorized party for the contractor in order to be reimbursable.