

Amendment # _____

Purchase Order # P
(Assigned by Business Unit)

Change Order # _____

Tracking # _____
(Assigned by Purchasing)

UNIVERSITY SYSTEM OF NEW HAMPSHIRE

AMENDMENT TO INDEPENDENT CONTRACTOR AGREEMENT (This agreement is not in effect until signed by all parties.)

CONTRACTOR INFORMATION

Name: _____
Address: _____ City _____ State _____ Zip code _____
Phone: _____ Fax: _____ Email: _____

Whereas the University and the Contractor desire to amend their agreement originally executed on:

Purchase Order Number: _____ Dated: _____

The University and the Contractor hereby agree to amend said agreement as follows (check all that apply):

<input type="checkbox"/>	Contract Amount / Adjust by		Revised Contract Amount	
<input type="checkbox"/>	Purchase Order Amount / Adjust by		Revised PO Amount	
<input type="checkbox"/>	Revised Dates of Services:		<input type="checkbox"/>	Other

Describe change to original ICA below:

AUTHORIZED SIGNATURES:

Hiring Administrator Name

Independent Contractor

Signature/Date

Signature/Date

Designated Campus Signature Authority

Signature/Date