

CHANGE ORDER

For use with Principal Cooperative Agreement No. A188951 between Hennepin County and the University of Minnesota.

Changes to WORK ORDER # _____

✓ Please attach first page of the Work Order to be changed AND all previous Change Orders.

Questions regarding this form? Contact Mary Knickerbocker (mary.knickerbocker@hennepin.us / 612-348-6190) or Scott Vargo, Hennepin-University Partnership (sbvargo@umn.edu / 612-348-0252), or their designees.

SECTION A: ADMINISTRATIVE INFORMATION

Change Order Number:

___1

___2

___3

___Other:

Project Title: _____

Original Start Date: / /

Original End Date: / /

Original Work Order Amount: \$ _____

SECTION B: CONTACT INFORMATION

HENNEPIN COUNTY CONTACT

Name:

Email:

Phone:

Mail Code:

Department:

Department ID:

Fund:

Account:

Ship to Code:

Project Business Unit:

Project #:

Activity:

For HSPHD Use Only

Service Area:

Budget Element:

Taxonomy Code:

HSPHD Contract Manager Name:

Mail Code:

Phone:

Email:

APEX Requestor:

___ **No APEX Requestor**

UMN ADMINISTRATIVE CONTACT (FOR YOUR DEPARTMENT)

Name:

Address:

Phone:

Email:

UMN LEAD FACULTY/STAFF CONTACT (PRINCIPAL INVESTIGATOR)

Name:

Academic Department:

Address:

Phone:

Email:

SECTION C: DETAILS REGARDING CHANGES that APPLY to this CHANGE ORDER

- List any changes to SCOPE OF WORK to be performed:

Justification:

- List any changes to TERM:

Justification:

- List any changes to the NOT-TO-EXCEED AMOUNT:

Justification (If necessary, attach a detailed budget. Specify the amount that may be used in the current year and what amount that may be carried over to the next year):

- List any OTHER changes:

Justification:

The Hennepin-University Partnership (HUP) Director must review this Work Order before it is submitted for signatures. Please contact the HUP Director (Scott Vargo, svargo@umn.edu) if you need this review. **Verify that the HUP Director has reviewed this Work Order:**

_____ Yes
_____ No