



NEW HAVEN PUBLIC SCHOOLS  
**AMENDMENT TO AGREEMENT**

Vendor Name: \_\_\_\_\_

Date: \_\_\_\_\_

Agreement #: \_\_\_\_\_  
Attach Copy Of Fully Executed Agreement

Amendment #: \_\_\_\_\_

Grant Name: \_\_\_\_\_

Grant # If Applicable: \_\_\_\_\_

Funding Source Acct #: \_\_\_\_\_

Original Amount of Agreement: \_\_\_\_\_

Amount of Agreement Prior To This Amendment: \_\_\_\_\_

Amount of this Amendment: \_\_\_\_\_

\_\_\_\_\_ Actual or \_\_\_\_\_ Estimate

\_\_\_\_\_ Increase \_\_\_\_\_ Decrease \_\_\_\_\_ No Change

Amount of Agreement Including This Amendment: \_\_\_\_\_

Funding Source & Acct # for Amendment: \_\_\_\_\_

Description and Need for Amendment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**All of The Terms and Conditions of Original Agreement Remain in Full Force and Effect**

Contractor's Signature: \_\_\_\_\_ (Name) \_\_\_\_\_ (Date)

\_\_\_\_\_  
(Title)

New Haven Board of Education:

\_\_\_\_\_  
President

\_\_\_\_\_  
(Date)