

## AMENDMENT TO PROFESSIONAL SERVICES AGREEMENT

**Modification Date:** [Click here to enter text](#)

**Institution:** [Click here to enter text](#)

**Contractor:** [Click here to enter text](#)

**Project Title:** [Click here to enter text](#)

**Sponsor Grant #:** [Click here to enter text](#)

**Corp Code/Responsibility Center #:** [Click here to enter text](#)

It is expressly agreed by the parties that this amendment is supplemental to the agreement of [Click here to enter text](#) (date of original agreement), which is made a part by referenced, and all terms, conditions, and provisions of the original agreement, unless specifically modified, are to apply to this amendment and are made a part of this amendment as though expressly rewritten, incorporated, and included herein. In the event of any conflict, inconsistency, or incongruity between the provisions of the amendment and any of the provisions or the original agreement, the provisions of the amendment shall in all respects govern and control.

This agreement shall be modified, altered, and changed only as follows:

**Work Statement:** The following duties shall be added ☐; deleted ☐ to the duties specified in the original agreement (please specify duties added or deleted): [Click here to enter text](#)

**Period of Performance:** Effective period of this Amendment is [Click here to enter text](#) to [Click here to enter text](#).

**Compensation:** Compensation for services during the above period of performance shall not exceed \$ [here to enter text](#). The rate for services is \$ [Click here to enter text](#) per HOUR/DAY/MONTH (please specify) for up to [Click here to enter text](#) HOURS/DAYS/MONTHS (please specify) and \$ [Click here to enter text](#), for travel and living expenses if applicable and if invoiced separately.

**Financial Conflict of Interest and Training:** If the Principal Investigator (PI) of the project has determined that the CONTRACTOR meets the definition of "investigator," a report of Financial Conflict of Interest is required using the attached Disclosure Statement. The PI shall identify all such individuals with completion date of training.

IN WITNESS WHEREOF, and in consideration of the additional terms and conditions as appended, both INSTITUTION and CONTRACTOR, through their respective duly authorized representatives, have executed this Agreement as of the date written below.

### INSTITUTION

By: \_\_\_\_\_

Title: \_\_\_\_\_

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

### CONTRACTOR

By: \_\_\_\_\_

Title: \_\_\_\_\_

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

### PRINCIPAL INVESTIGATOR

By: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Principal Investigator

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