

CHANGE FORM no.

PROJECT UNDER THE PROGRAMME

STRATEGIC PARTNERSHIPS

.....
(please enter the name of the NAWA Programme under which the Project is being implemented)

Agreement number	
Name of the Beneficiary	

Information on changes to the Agreement

Changes to the Agreement are made on the basis of a written request, the so-called Change Form, signed by the Beneficiary's legal representative or a person authorized by the Beneficiary. The Beneficiary should obtain NAWA's approval of the proposed changes to the Project prior to their occurrence.

Amendments to the application shall become effective as of the date NAWA accepts the modified version of the Change Form (resulting in modifying the application) or signs an Annex to the Agreement.

Please indicate which of the changes applies to your current change form:

1. Change of formal status or address *(fill in if applicable)*

Title or number of the section of the application in which the changes will be introduced	
Content of the application before the change	Content of the application after the change
Justification:	

2. Change of the content-related scope of Project activities

Title or number of the section of the application in which the changes will be introduced	
Content of the application before the change	Content of the application after the change
Justification:	

3. Change of the schedule (task implementation)

Title or number of the section of the application in which the changes will be introduced	
Content of the application before the change	Content of the application after the change
Justification:	

4. Change of indicators/results/products

Title or number of the section of the application in which the changes will be introduced	
Content of the application before the change	Content of the application after the change
Justification:	

5. Changes in the budget

Title or number of the section of the application in which the changes will be introduced	
Content of the application before the change	Content of the application after the change

Justification:	

STATEMENT

I, the undersigned, hereby state that the information provided in this Change Form is true and reflects the legal and factual status existing at the moment when this Change Form is submitted. At the same time, I confirm that all statements, data and information included in the documents submitted to NAWA by the Beneficiary in connection with the request for the acceptance of changes to the Agreement, in particular concerning the Beneficiary's legal status, method of representation and powers of attorney granted, are up-to-date, true, binding and valid at the moment of signing the Change Form or Annex to the Agreement (if Annex is necessary). I undertake to inform NAWA immediately in writing of any changes in the statements, data and information referred to above and to submit, upon NAWA's request, relevant documents confirming the changes.

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Place and date

.....
Name of the Beneficiary's legal representative