Change Request Form

1. Description of Requested Change:
2. Reason/Justification for Change:
3. Additional or Deleted Tasks or Deliverables Required by Change:
4. Additional or Deleted Cost and/or Timeframes Required by Change:

The signatures below represent that the New York State Office of Information Technology Services and (insert Bidder/vendor company name) are in agreement with the above change(s) to the project deliverables.

New York State Office of Information Technology Services	(insert Bidder/vendor company name)
Name (Print):	**Name (Print):**
Signature:	**Signature:**
Title:	**Title:**
Date:	**Date:**