

# WASHBURN UNIVERSITY

## CHANGE ORDER FORM

Project:	
Vendor:	
Purchase Order #:	

Change Order #:	
Date:	
Change Order Amount:	\$

Description:	

Original Contract Value:	
Sum of Previously Approved Changes:	
Current Contract Value:	
Change Order Value:	
New Contract Value:	\$

Approvals:

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Project Lead Approval Signature (Up to \$5,000) Date

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Director Approval Signature (Up to \$10,000) Date

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AVP Approval Signature (Up to \$25,000) Date

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VPAT Approval Signature (Over \$25,000) Date

\*\* Vendor documentation must be attached to this form including change order request and/or proposal.