

THE OHIO STATE UNIVERSITY RESEARCH FOUNDATION
 1960 Kenny Road, Columbus Ohio 43210-1063

CONSULTANT AGREEMENT AMENDMENT

Instructions: To modify a Consultant Agreement check the appropriate boxes under Amendment Action.

Amendment No.:

RF Project No.:	RF Purchase Order No.:
Principal Investigator Information:	Consultant Information:
Name: Campus Address:	Name: Home Address:
Phone No.:	Phone No.:
Email Address:	Email Address:

Department Contact: Name: _____ Phone No.: _____ Fax: _____ Email: _____

Amendment Action:

- A. Period of Services:** From _____ through _____
- B. Location of Services:** In U.S. Outside U.S.
- C. Scope of Work:** Unchanged Revised (Attach revised detailed Scope of Work)
- D. Human Subjects:** The consultant will engage in non-exempt research involving human subjects. Attach the Individual Investigator Authorization Agreement.
- E. Fee (check all that apply):** Rate change Additional time _____ Other: _____

Select one (1) of the following fee schedules:

Daily Rate: \$ _____ X No. of Days: _____ = Amount of Change: \$ _____ Increase Decrease
 Cumulative agreement amount with this amendment: _____

Hourly Rate \$ _____ X No. of Hours: _____ = Amount of Change: \$ _____ Increase Decrease
 Cumulative agreement amount with this amendment: _____

Other (Attach cost analysis documentation for why consultant fee is reasonable and how it was determined.)
 Cumulative agreement amount with this amendment: _____ Increase Decrease

- F. Reimbursable Expenses:** Unchanged _____ Revised _____ (Attach revised detailed Scope of Work, including description of reimbursable expenses and estimated cost.)
 Travel: _____ Other: _____

Reimbursable expenses must be submitted on a Non-Employee Payment Request form. Original receipts required.

PRINCIPAL INVESTIGATOR: _____
 Signature Date

IN WITNESS WHEREOF, the parties hereto have executed this Amendment on the year and date last specified.

THE OHIO STATE UNIVERSITY RESEARCH FOUNDATION:

CONSULTANT:

 Signature Date

 Signature Date

 Type Name & Title

 Type Name & Title