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**Request for Changes No\_\_**

The LP must fill in the Request for Changes and send it via email to the assigned JS project manager for the prior check. The electronically signed final version of the Request for Changes should be submitted to the JS to an email pasts@varam.gov.lv.

|  |  |
| --- | --- |
| Project ID | LL- |
| Project title |  |
| Project acronym |  |
| Lead partner |  |
|  |

|  |
| --- |
| **Please specify categories of changes:** |
| Minor changes |[ ]
| Major changes |[ ]
| Changes in the budget\* (reallocation between cost categories and/or partners) |[ ]

*\** *For changes in the budget, together with the Request for Changes, a Budget reallocation table must be submitted.*

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| --- |
| **Please describe requested changes:** |
| 1. **For** *<indicate the project partner’s number for whom changes are needed>*

**Requested changes:***<provide a description of the proposed changes, indicating the activity and/or deliverable the changes are relevant to, also, financial sources covering these changes, if relevant, indicating changes in cost category and cost item(s), etc.>***Justification for requested changes:***<explain the need for the changes: how proposed changes help achieve a project objective more efficiently and foster cooperation>*. **Changes in JEMS:***<indicate how the description of activity and/or deliverable will change due to requested changes>***List of Annexes:**No. 1 Budget reallocation table *(mandatory for budget changes)* |

|  |  |
| --- | --- |
| Position of the Signatory[[1]](#footnote-1) |  |
| Name and surname of the Signatory |  |
| Signature | e-signed document |

DOCUMENT IS SIGNED WITH SECURE ELECTRONIC SIGNATURE AND CONTAINS A TIME STAMP

1. The Request for Changes can be signed by the Lead partner’s Legal representative or Contact person specified in section “Contact” of the Application Form. [↑](#footnote-ref-1)