**M-ERA.NET Change Request Form**

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| **Project information** |
| Project Title | Click here to enter text. |
| Project Acronym | Click here to enter text. |
| Call Year | Click here to enter text. |
| Project coordinator and funding organisation | Click here to enter text. |
| Project partners and funding organisations | Click here to enter text. |
| Contact person(name, organisation, email) | Click here to enter text. |

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| **Requested change** |
| [ ]  | Project extension |
| Initial end date | Click here to enter text. |
| Initial project duration | Click here to enter text. |
| Proposed end date | Click here to enter text. |
| Proposed project duration | Click here to enter text. |
| Explanation | Click here to enter text. |

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| [ ]  | Other |
| Description of requested change | Click here to enter text. |
| Explanation | Click here to enter text. |

By submitting this form, I confirm that all project partners are aware of the proposed project changes.

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| **Date**: | **Name and signature**: |

*The following section is to be filled by respective funding organisations and the M-ERA.NET Call Secretariat:*

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| **The proposed project changes are confirmed by** |
| Funding organisation (*all funding organisations involved in the project must be listed here*) | Name (*person confirming the changes on behalf of the funding agency*) | Date |
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| **The proposed project changes are confirmed by the M-ERA.NET Call Secretariat** |
| Name(*person confirming the changes on behalf of the M-ERA.NET Call Secretariat)* | Date |
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