LOUISIANA TRANSPORTATION RESEARCH CENTER

RESEARCH PROJECT MODIFICATION AGREEMENT

SUBMITTING AGENCY

DATE:	DA	т	E:	
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STUDY NAME	
LAGOV SIO NO.	LTRC PROJECT NO.
PRINCIPAL INVESTIGATOR	
CURRENT CONTRACT COST	CURRENT COMPLETION DATE

DESCRIPTION AND REASON FOR PROPOSED MODIFICATION: (ATTACH ADDITIONAL SHEETS AND REQUIRED DOCUMENTS AS NECESSARY)

CONTRACT TIME REVISION		CONTRACT COST REVISION *			
INCREASE	NUMBER OF MONTHS	INCREASE	FISCAL YEAR		
DECREASE		DECREASE	AMOUNT		
REVISED COMPLETION DATE:		REVISED F.Y. COST:			
		REVISED TOTAL CONTRACT COST:			

(* INCLUDES INDIRECT COST FOR EACH AMOUNT)

TYPE OF MODIFICATION								
THE PROPOSED MODIFICATION CO	OMPRISES A CHANGE IN	THIS STUDY WITH	REGARD TO:					
BUDGET*	TIME*	SCOPE	WORK PLAN*	PERSONNEL				
			<u> </u>					
(* ATTACH REVISED BUDGET, REVISED TIME SCHEDULE, OR WORK PLAN)								
IT IS MUTUALLY AGREED TO PERFORM A	ND ACCEPT THE ABOVE I	MODIFICATIONS T	O THE ORIGINAL CONTRACT	_				
REQUESTED BY:		RECOMMENDED BY:						
REQUESTED DT.			RECOMMENDED BT:					
PRINCIPAL INVESTIGATOR	DATE		LTRC PROJECT MANAGER		DATE			
			LTRC GROUP ADMINISTRAT	OR	DATE			
		LTRC ASSOCIATE DIRECTOR, RESEARCH			DATE			
			LIRC ASSOCIATE DIRECTOR	K, RESEARCH	DATE			
APPROVED BY:			APPROVED BY:					
ASSOCIATE VICE-CHANCELLOR	DATE		LTRC DIRECTOR		DATE			
RESEARCH OR INSTITUTION	DATE				DATE			
RESEARCH HEAD								

ITEM		Percent of Time on Project			FUNDS (Omit Cents)		
			Tot. Proj. Cost	Fiscal Year	Fiscal Year	Fiscal Year	Remaining
1. PERSONNEL							
(List all positions and persons incl. principal							
and co-researcher.							
Amounts requested must not exceed proportion of							
total salary computed from % of time spent							
based on a 40 hour work week. Include graduate							
students if any).							
	Total Salaries and Wages						
	Plus% for Employee Benefits						
	Total Personnel Costs						
2. NON EXPEND-ABLE EQUIPMENT							
EQUIFMENT							
(Itemize)							
	Total Non-Expendable Equipment						
3. CONSUMABLE SUPPLIES							
(Itemize							
	Total Consumable Supplies						
4. TRAVEL							
(Itemize							
	Total Travel						
5. OTHER EXPENSES							
(Itemize							
	Total Other Expenses						
6. TOTAL DIR	ECT COSTS						
7. MODIFIED	TOTAL DIRECT COSTS						
8. TOTAL IND (attach documentation to	RECT COSTS substantiate indirect cost rate used and method of application in Part VIII)						
9. TOTAL COS	ITS						