ANNEXES

# Annex 1: Change Request Form

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| **Change Request Form***: This form can be utilized when informing of a change or seeking approval for a change.* | |
| **HEI ICI Project acronym:** Click here to enter text. | **Date (dd/mm/yy):** Click here to enter a date. |
| **HEI ICI Project name:** Click here to enter text. | |

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| **Change Category (Check (X) all that apply):**  Schedule/Work plan  Budget  Scope/Result areas  Fixed assets  Staff/ Experts  Resources  Other, what Click here to enter text. |
| **Describe the Change(s) to be Made:** Click here to enter text. |
| **Describe the Reasons for the Change(s):** Click here to enter text. |
| **Describe Consequences or Risks to be Considered for the Change(s):**  Click here to enter text. |
| **How Have Project Representatives Agreed on the Change(s)? Please Describe Process:**  Click here to enter text. |
| **List of Attachments: (Number and Name):** *Please attach any documents you wish to support your request. New budget to be attached in case of budget reallocations exceeding 10 %*  Click here to enter text. |
| **Signature and Name clarification** (*Project coordinator or project representative)*  Click here to enter text. |

To be filled in by Finnish National Agency for Education (EDUFI)

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| **Decision (X):** Approve Reject Approve with Conditions | | |
| **Justification of Approval, Rejection, or Description of Conditions:** Click here to enter text. | | |
| On behalf of HEI ICI Programme administration (or, if needed MFA representative): | | |
| **Date** | **Name /Title** | **Signature** |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. |

To be returned signed (scanned) electronically to heiici@oph.fi or via mail to: HEI ICI Programme, Finnish National Agency for Education, P.O. Box 380, FI-00531 Helsinki, Finland