

Addendum

Original Contract #		Addendum #	
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**ADDENDUM
VENDOR SERVICE AGREEMENT
BY AND BETWEEN
ROWAN UNIVERSITY
AND**

- Dates:** *Event Date/Dates on Rowan Premises/Expiration Date*
- Scope of Services:** *Be sure to outline the change in services from the original contract.*

3. Cost:

Contract Cost prior to this addendum:	
Cost will be increased/decreased by:	
New Contract Cost, including this addendum:	

Vendors are required to provide one or more of the following signed forms depending on your business classification status:	
<i>Indicate if changes were made since last doing business with Rowan University</i>	
Independent Contractor Determination Form	<input type="checkbox"/> No Change <input type="checkbox"/> Attached <input type="checkbox"/> N/A
W9 (US Citizens) or W8 (Non-US Citizens BEN, ECI, IMY, & EXP):	<input type="checkbox"/> No Change <input type="checkbox"/> Attached
Rowan University Employment Status (full-time, part-time, adjunct, etc.)	<input type="checkbox"/> No Change <input type="checkbox"/> Attached <input type="checkbox"/> N/A

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the Effective Date abovementioned:

Date: _____

BY: _____

Vendor

Date _____

BY: _____

Authorized Signatory, Rowan University