Clint Independent School District
Agreement Modification Form

All fields must be completed, if the field does not apply, please enter N/A.

Agreement Modification Information

Agreement No.: _____ Amendment/Modification No.: _____ Date: _____

Purchase Order No.: _____

Dept/Campus Adminstrator: _____ Title: _____

Vendor/Company: _____ DBA: _____

Contact Name: _____ Phone: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

This item modifies the Agreement No. as described in the Description of Modification below

Agreement No.: _____ Dated: _____

- ☐ **Construction Agreements:** This Change Order is requested pursuant to Texas Education Code § 44.0411 (Change Orders). The proposed changes are described in the Description of Modification below.
- ☐ **All Other Agreements:** This Contract Modification is requested in accordance with the terms and conditions of Agreement No. above. The proposed changes are described in the Description of Modification below.
- ☐ The above mentioned agreement is modified to reflect the administrative changes (such as changes to the payment office, funding source, or other administrative information) set forth in the Description of Modification below.
- ☐ Other: _____

Description of Modification

Identify the specific changes to the agreement and the reason for them.

(Organize by section headings, including agreement subject matter or short title where feasible. Modifications for federally funded PO's are not allowed.)

Contractor is required to sign if the modification changes the scope of work, contract price, contract term, deliverables, specifications, or any other substantive terms and conditions of the agreement.

Impact on Contract Price

☐ Increased by $ _____ ☐ Decreased by $ _____ ☐ Remains unchanged New Total Price: $_____

Department/Campus: _____

Name: _____ Authorized Signature: _____ Date: _____

Modification Approval Routing *(Initial if approved)*

Assistant Superintendent: _____ Date: _____ Facilities / Technology: _____ Date: _____

Procurement Designee: _____ Date: _____ Chief Financial Officer: _____ Date: _____

Execution of Modification

EXCEPT AS EXPRESSLY MODIFIED HEREIN, all terms and conditions of the referenced contract remain unchanged and in full force and effect.

Contractor (Officer/Authorized Signer)

Name: _____ Signature: _____ Date: _____

Superindentent or Desginee:

Name: _____ Signature: _____ Date: _____

Updated: 07.08.2026