



This form represents a request to modify the existing parameters of a project but is not financially or contractually binding. Please complete all indicated fields and send a copy to [bmchmpcore@unomaha.edu](mailto:bmchmpcore@unomaha.edu) with any and all supporting documentation, research, drawings, pictures, and models that could assist in accurately modifying existing plans. The Biomechanics Machining & Prototyping Core will provide an assessment and e-mail response within 3-5 business days.

## Project Change

_____	Project Name
Name _____	Date _____
Street Address _____	Company/Institution _____
Email Address _____	Primary Phone Number _____

### Type of Changes Requested:

Please describe the nature of your project changes below **in detail**.

### For Administrative Use Only:

_____	Date _____
Action Taken	
_____	Date _____
Action Taken	
_____	Date _____
Action Taken	
_____	Date _____
Machining & Prototyping Core Director Signature	
_____	Date _____