Eastern Suffolk BOCES
Educational Services That Transform Lives

Contract Modification Request

Board of Cooperative Educational Services
First Supervisory District of Suffolk County
201 Sunrise Highway
Patchogue, NY 11772

Date ___/___/ 20___

Check One ☐ This is a request to modify participation in an existing Co-Ser.

☐ This is a request to participate in a new Co-Ser.

To be Completed by Person Initiating Request (May be BOCES or District Employee)

School District _____ Service for School Year 20___ - 20___

If Applicable
Details of Service Modification Requested (include names where applicable)

_____

_____

_____

To be Completed by BOCES

BOCES Contact Person _____ Co-Ser No. _____

Telephone No. _____ Cost of Service $_____

To be Completed by School District

School District Contact Person _____ Telephone No. _____

_____ _____
Signature of Superintendent of School District Date

Please forward a copy to your School District Business Official.

When this form is completed, please forward original to

Manager of Administrative Services
Eastern Suffolk BOCES
201 Sunrise Highway
Patchogue, NY 11772