EU funds for Malta Restricted ENG - Colour.jpg

## **Change of Project Manager Form**

I, \_(Name of Authorised Representative)\_\_\_\_\_\_\_\_ as Authorised Representative on behalf of \_(Name of Undertaking)\_\_\_\_\_\_\_\_ as the Beneficiary, appoint \_\_(Name of new Project Manager)\_holder of ID card No. \_\_(ID No.)\_\_\_ to the position of Project Manager in the stead of \_(Name of current Project Manager)\_\_\_for the operation \_(Project Reference)\_\_\_\_\_\_\_\_\_ effective as of \_\_\_(Date of new appointment).

The new Project Manager holds the position of (Insert Position within Enterprise) within the enterprise and may be contacted on (Insert Phone Number) and (Insert email Address).

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Authorised Representative | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of New Project Manager | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |

Operational Programme I - European Structural and Investment Funds 2014-2020

“Fostering a competitive and sustainable economy to meet our challenges”

Aid Scheme part-financed by the European Regional Development Fund

Co-financing rate: 80% European Union; 20% National Funds

