



**New Jersey Bonner
AmeriCorps Program**
Contract Amendment: Service Hours Plan
2013-2014



I, _____ (print name), hereby agree to complete my AmeriCorps term of service according to the **Service Hours Plan** attached. By following this **Service Hours Plan**, I will complete my _____ hour commitment to the New Jersey Bonner AmeriCorps Program by _____ (date). I understand that my living allowance will cease after my original end date of _____ (date), as outlined in the Member Contract.

My progress will be monitored by my weekly BWBRS hour log submission. I understand that if I do not adhere to my **Service Hours Plan**, I may be exited for cause from the AmeriCorps Program.

I have read and agree to the terms of this contract amendment.

Member Name

Member Signature

Date

Site Supervisor Signature

Date

Campus Director Signature

Date

Program Staff Signature

Date