1. Name and Address of Reporting Person

Dorland Gary A

(12015 LEE JACKSON HIGHWAY FAIRFAX VA 22033)

2. Date of Event Requiring Statement (Month/Day/Year)

11/26/2004

3. Issuer Name and Ticker or Trading Symbol

MANTECH INTERNATIONAL CORP [ MANT ]

4. Relationship of Reporting Person(s) to Issuer

(x) Officer (give title below)

President div./business unit

5. If Amendment, Date of Original Filed (Month/Day/Year)

11/30/2004

6. Individual or Joint/Group Filing (Check Applicable Line)

(x) Form filed by One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 4)</th>
<th>2. Amount of Securities Beneficially Owned (Instr. 4)</th>
<th>3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>4. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
</table>

Table II - Derivative Securities Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Derivative Security (Instr. 4)</th>
<th>2. Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)</th>
<th>4. Conversion or Exercise Price of Derivative Security</th>
<th>5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>6. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
</table>

Employee Stock Option (right to buy) (1)

(2) 11/07/2014  Class A Common Stock  20,000  22.5  D

Explanation of Responses:

1. These option shares were inadvertently omitted from the reporting person's original Form 3.
2. The option vests in three equal annual installments, beginning on November 8, 2005 (the first anniversary of the date of the grant).

Michael R. Putnam, by Power of Attorney

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).


Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

Date