



UNIVERSITY OF WASHINGTON

### Project Approval Form (PAF)

**Project Title:** Kincaid

Ravine Bioswale

Hydrological

Assessment

**Primary Contact:**

Dan Hintz

By signing this form, I confirm that the project lead(s) has/have discussed this project with me, and that I (please check all that apply)

- approve the stated project to be conducted on the University of Washington-Seattle campus (this approval can only be given by campus units or by individuals on behalf of campus units) (REQUIRED).
- agree to be a part of the project team.
- will provide support to the project by being a partnering organization, department or individual.
- am the administrator for my campus unit and agree to for the financial and human resources Transactions associated with this project.
- agree to take over the operational costs of this project following completion.

**Other notes (if applicable):**

<b>Name/Signature:</b> <i>Jan Ewing</i>	<b>Date:</b> <i>4 Feb 2015</i>
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<b>Title:</b> <i>Faculty</i>
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<b>Department/Organization:</b> <i>SEFS</i>
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<b>Phone:</b> <i>206 543-4426</i>	<b>Email:</b> <i>kern@uw.edu</i>
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**Additional Notes:**

Please save this completed form as "Project Contact Name\_Project Name" and email it to [csfcoord@uw.edu](mailto:csfcoord@uw.edu). The email originating directly from the approving body will be considered a signature. Paper copies may be