



UNIVERSITY OF WASHINGTON

### Project Approval Form (PAF)

**Project Title:** UW Life Sciences Building-Photovoltaic Implementation

**Primary Contact:** Alex Ratcliff, alexr529@uw.edu

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>Robert Goff</i>	<b>Date:</b> <i>4/27/17</i>
<b>Title:</b> <i>Assistant to the Chair of Biology for LSB</i>	
<b>Department/Organization:</b> <i>Biology</i>	
<b>Phone:</b> <i>2064654556</i>	<b>Email:</b> <i>rwgoff5@uw.edu</i>
<b>Additional Notes:</b>	

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 sent through campus mail to Attn: CSF Coordinator, Box 351248 or dropped off to the CSF Office at Gerberding Hall, Room B-40 and must include an original signature of the approving body.