

Project Approval Form

Primary Contact: Kate Stevenson (Kates 17@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 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 be responsible for the financial and human resources transactions associated with this project. agree to take over the operational costs of this project.
With the following stipulations (if applicable):
Name/Signature: Date:
Title: DIRECTOR.
Department/Organization:
Phone: 206 685-1468 : Email: vchener (o uw. eau
Phone: 206 65- 466 Additional Notes: FACILITIES MAINTONANCE+ CONSTRUCTION PERSONNEL AROM THE SOUTHWEST ZONE WILL ASSIST ON FIFE PROJECT. Please save this completed form as "Project Contact Name Project Name" and email it to uwcsf@uw edu. The
Please save this completed form as "Project Contact Name Project Name" and email it to uwcsf@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 Fund Coordinator, Box 351248 or dropped off to the CSF Office at 280

Gerberding Hall and must include an original signature of the approving body.