



UNIVERSITY OF WASHINGTON

Project Approval Form (PAF)

Project Title: No-Till Soil Health and Weed Management

Primary Contact: Adam Houston, adamhb@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):

Name/Signature: <u>Fred Hoyt</u>		Date: <u>1/15/2021</u>
Title: <u>Director</u>		
Department/Organization: <u>University of Washington Botanical Gardens</u>		
Phone: <u>206-543-3137</u>	Email: <u>fhoyt@uw.edu</u>	
Additional Notes:		

Please save this completed form as "Project Contact Name_Project Name" and email it to 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.