

UNIVERSITY OF WASHINGTON

Project Approval Form (PAF)

Project Title:	SER-UW Native Plant Nursery - Future Growth	<u></u>	
Primary Contact:	Sarah Shank		

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)

- X 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)**.
- X 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:	1 011	Date:	
Jonathan Bakker	-The Solar.	May 4, 2018	
Title:			
Associate Professor			
Department/Organization:			
School of Environmental and F	orest Sciences		
Phone:	Email	:	
206-221-3864	jbakk	jbakker@uw.edu	
Additional Notes:			

Please save this completed form as "Project Contact Name_Project Name" and email it to <u>csfcoord@uw.edu</u>. 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.