

Acceptance of Administrative Responsibility Form (AARF)

Project Title: Native	Green Roof Sc	ulpture (feasibility	studen)		
Organizational (ORG) Code:	2540118000	1000.00.1	014017)		
Grant Total: \$5,720					
Primary Contact: Violetta Walker					
Budget # (CSF-inputted):					

By signing this form, I certify that I am the administrator (or equivalent) for my campus unit, in charge of expense, human resources, and other financial transactions and I agree to the following:

- To be responsible for any hiring actions and/or purchases associated with this project.
- To financially track this project in a "16-" (ASUW) budget created by the CSF under the host departments the Financial Organization Code (OrgCode), and complete monthly BAR reconciliation.

Furthermore, I acknowledge the following:

- Overages: Any and all overages are the responsibility of the project / host department.
- Leftover Funds: Any unspent balance is to be returned to the CSF to go toward other projects. Exceptions can be made at the discretion of the CSF.
- Scope Changes: The CSF should be informed in advance of any changes in scope exceeding 10% of the total budget.

Notes (if applicable):

Project Lead Name/Signature: Luke Armitstead Date: 05/01/19					
Administr Violetta	ator Name/Signature: Walker	Violetta i	Wallen	Date: 05/02/2019	
Title:	Administrator		Department/Organization: School of Art + Art History + Design		
Phone:	206-685-2552		Email: vwalker@uw.edu		

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.