



UNIVERSITY OF WASHINGTON

Project Approval Form (PAF)

Project Title: LIFE SCIENCES BUILDING ROOFTOP SOLAR ARRAY (2)

Primary Contact: Alex Ratcliff

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):

<i>Michelle K. Conrad</i>	
Name/Signature:	Date: <i>1/18/18</i>
<i>Administrator</i>	
Title:	
<i>Biology</i>	
Department/Organization:	
<i>206-685-8241</i>	
Phone:	
Email: <i>MCONRAD@UW.EDU.</i>	

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.