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**Project Approval Form (PAF)**

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| **Project Title:** Kincaid Ravine Bioswale Hydrological Assessment |  |
| **Primary Contact:** Dan Hintz |  |

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| 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.  *X* 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: Matt Schwartz** | | **Date: 1/11/15** |
| **Title: Sustainable Stormwater Coordinator, Kincaid Ravine Project Manager** | | |
| **Department/Organization: School of Environmental and Forest Sciences, UW** | | |
| **Phone: 203-427-7383** | **Email: mateos@uw.edu** | |
| **Additional Notes:** | | |

*Please save this completed form as “Project Contact Name\_Project Name” and email it to* [*csfcoord@uw.edu*](mailto: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.*