

Project Approval Form (PAF)

Project Title:	Go 7	eam	90	OVE	een
Primary Contact:	Jaso	in Hoo	din	t .	ž)
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By signing this form	ı, I confirm th	at the project l	ead(s) has,	have dis	cussed this project with me, and that I
(please check all th	at apply)				
approve the st	ated project	to be conducte	d on the U	niversity	of Washington-Seattle campus
					uals on behalf of campus units)
□ agree to be a p	part of the pr	oject team.			
	formation of the second of the	The state of the s	g a partner	ing orga	nization, department or individual.
					e financial and human resources
		th this project.	Ü		
□ agree to take			this proje	ct follow	ing completion.
□ agree to take	Sver the oper	dijeriai seete e.			
Other notes (if app	olicable):				
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a = 15					
Name/Signature:					Date:
RICHAR	KEILC	1	Ko	1	May 8 2018
Title:					
Progran	1 06 -	the Envi	ronne	nt	(POE)
Department/Organ	nization:				
Phone:	~		Em	ail:	ckkeil@vw.edu
Additional Notes:	0	. 14			

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.