

Project Approval Form (PAF)

By signing this form, I confirm that the project lead(s) has/have discussed this project with me, and that I

Project Title:

Primary Contact:

| (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): |
| other notes (if appreadic). |
| Name/Signature: Date: Date: |
| 05/08/18 |
| President of SAGE; Student in Program on the Environment |
| Department/Organization: |
| Department/Organization: Student Association for Green Environments (SAGE) Phone: Email: |
| Phone: Email: |
| Phone: 573-356-4580 Email: huskeyjevw.edv |
| 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.