

## **Project Approval Form (PAF)**

Project Title:	SER-UW Native Plant Nursery Improvements		
Primary Contact:	Wendy Star		
By signing this form, (please check all that approve the state (this approval can (REQUIRED).	I confirm that the project lead t apply) ted project to be conducted o	s) has/have discussed this project the University of Washington-Se s or by individuals on behalf of ca	eattle campus
am the administransactions as	trator for my campus unit and sociated with this project.	artnering organization, department of the financial and hum project following completion.	ent or individual.
Other notes (if appli	cable):		
Name/Signature: Wendy	Star	Date: 4/21/2016	
Title:			
Administrator			
Department/Organia	zation:		
School of Environme	ntal and Forest Sciences		
Phone:		Email:	
(206) 685-2047		wkstar@uw.edu	
Additional Notes:			

Please save this completed form as "Project Contact Name\_Project Name" and email it to <a href="mailto:csfcoord@uw.edu">csfcoord@uw.edu</a>.

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.