

Acceptance of Administrative Responsibility Form (AARF)

Project Title:	Electronic Waste Guide Syste	m	
Budget Numb	er:		
Grant Total:	~\$7500.00	•	
Primary Conta	ct: William Zhou		
expense, humai	n resources, and other financial tes es associated with this project. I ncial Organization Code (OrgCod	transactions; I agre agree to financially	alent) for my campus unit, in charge of the to be responsible for any hiring actions of track this project in a "16-" (ASUW) budge unit (
Notes (if applica	ble):		
7m.k	1 New come	90	
Name/Signatur	e: sutent Dice	eh	Date: 4/15/16
Title:	ding services	- vu	Recycling
Department/Or			
Phone:	-8928	Email:	m. lyna o www.eta

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.



Project Approval Form (PAF)

Primary Contact: William Zhou	
Primary Contact: William Zilou	
By signing this form. I confirm that the project lead(s	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 unit	s 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 page.	artnering organization, department or individual.
$\ \square$ am the administrator for my campus unit and a	gree to for the financial and human resources
Transactions associated with this project.	
$\hfill\Box$ agree to take over the operational costs of this	project following completion.
Other notes (if applicable):	
As the project progresses, other applicable boxes ma	ay be checked depending on circumstance
7m/ Newcone	7
Name/Signature:	Date:
Assistant Druck	9/15/16
Title: Bulding Services	- UW Recording
Department/Organization:	
Phone: 685-827	Email: em. Ing @ uw.ed
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.