Acceptance of Administrative Responsibility Form (AARF)

**Project Title:** LIFE SCIENCES BUILDING ROOFTOP SOLAR ARRAY (2)

**Budget Number:**

**Grant Total:** $50,000

**Primary Contact:** Alex Ratcliff

By signing this form, I certify that I am the administrator (or equivalent) for my campus unit, in charge of expense, human resources, and other financial transactions; I agree to be responsible for any hiring actions and/or purchases associated with this project. I agree to financially track this project in a “16-” (ASUW) budget within the Financial Organization Code (OrgCode) structure of my unit (254059000), and complete monthly BAR reconciliation.

**Notes (if applicable):**

**Name/Signature:**

**Date:**

**Title:** Administrator

**Department/Organization:**

**Phone:** 206-685-8341

**Email:** MConrad@uw.edu

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.

Updated March 2015