## Approval of Project Proposal - Signatures

Required for the MNCY SCN HOIF 3.0 Competition

Primary Applicant:		
Name (printed)	Signature	Date
AHS Operational Lead:		
Name (printed)	Signature	Date
Primary Applicant's Departi as applicable:	ment Head (university) or AHS Exec	utive Director (or higher),
Name (printed)	Signature	Date
	(or delegate) if funds to be held at nature processes at the university	
Name (printed)	Signature	Date
	a university, a signature from fina ill be held (organization must be pr	
Name (printed)	Signature	Date