

FLORIDA AGRICULTURAL EXPERIMENT STATION

PROJECT STATEMENT TRANSMITTAL FORM

See <http://research.ifas.ufl.edu/ra/cris/instructions.asp> for complete instructions
Submit original Project Statement with cover sheet

Project Number
(assigned by Research Adm)

Date

Project Title (140 character limit): _____

Investigator(s): _____

Type: State _____ Hatch _____ Grant _____ McIntire-Stennis _____ Animal Health _____

***** Required Signatures & Reviewers *****

Reviewers (required)

(scientists in other states can be reviewers)

1. _____

2. _____

3. _____

4. _____

Signatures (required)

(use additional sheets if needed)

Principal Investigator Date

Co-PI(s) Date

Co-PI(s) Date

Unit Leader(s) Date

APPROVAL OF PROJECT:

Dean and Director Date