



The Graduate College – Graduate Student Senate Original Work Grant (OWG)

Signature Sheet

** Please note these guidelines and proposal preparation instructions supersede all previous versions. **

By signing this document, I agree to all the terms and conditions of the Original Work Grant Program.	
PI Signature	Date
PI - Printed Name	
herein is academically sound and I am academically r my understanding that the student, if funded, is requi	roughly read the attached proposal. The work described responsible for this student. By signing below, I confirm ired to submit a Final Report. Failure to submit the Final S Grant funding opportunities available to graduate
Advisor Signature	Date
Advisor - Printed Name	
As the Graduate Chair, I hereby certify that the above department and that I am fiscally responsible for this	
Graduate Chair Signature	Date
Graduate Chair - Printed Name	