

# SJSU Research Foundation

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## Institutional Internal Approval Request

**Proposed Action:** \_\_\_\_\_

**Research Foundation Account Number:** \_\_\_\_\_

**Description of and Justification for Proposed Action:**

**Assurances:**

I certify that the proposed action is:

1. Necessary to achieve the project objectives supported by the project.
2. Consistent with the grant terms and conditions.
3. Not constituting a change in scope of the project.

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**Principal Investigator Signature**

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**Date**

The above request has been reviewed and approved with respect to academic aspects.

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**Department Chair Signature**

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**Date**

I certify that the above request is consistent with agency and SJSU Research Foundation policies.

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**Director of Sponsored Programs Signature**

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**Date**