

**Attachment 1  
Funding Proposal Approval Routing Sheet**

<b>Request for Review and Sign off (Originating Department)</b>		
Department: _____	Routing Date: _____	
Project Lead: _____	Signature: _____	
Sponsor/Manager: _____	Signature: _____	
Operations Manager: _____	Signature: _____	
Proposal Title: _____	Sign-Off Due date: _____	
	RUSH (Date Req'd): _____	
<b>Scope of Work:</b> <i>(Additional notes/comments for reviewers):</i>		
Project Start Date: _____	Funding Agency: _____	Total Proposal Amount: _____
Project End Date: _____	College Contribution: Cash: _____	In-Kind: _____
<b>Review Process</b>		
Please check the box beside other areas that should review this proposal, as appropriate:		
<input type="checkbox"/> Risk Management Analyst: _____		
<input type="checkbox"/> General Counsel: _____		
<input type="checkbox"/> Finance: _____		
<input type="checkbox"/> _____		
IDEAWORKS (Dean, Applied Research): _____		
Vice President, Academic (if applicable): _____		