

ENDORSEMENT of a FACULTY RESEARCH or ADVANCED STUDY PROPOSAL

Default Question Block

Your name and contact informat	ion:
First name	
Last name	
COMPLETE email address	
Phone number	
Department or Program	
Faculty member whose proposal	you are endorsing.
First name	
Last name	
Title of the project you are endo	rsing.
	submitting this form, you are indicating that the work being proposed is ble within the existing infrastructure, and that the work merits Lafayette's
 I endorse this project without rese 	ervation
 I endorse this project with some r 	eservation
I do not endorse this project	
	onal comment, but if you believe that it is necessary in this case to explain your any), you may use this space to do so.

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Please click on the submit button to submit your endorsement. You will be redirected to a page that contains your responses. We recommend clicking on the icon in the top right hand corner of that page to create a PDF file for your records.

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