**SGEF PROJECT PARTNERS**

*List any staff or faculty with department that will be directly involved in your project and are important to its completion. You may add external stakeholders, if needed. These signatures are not endorsements of your project; they are evidence that you have consulted relevant stakeholders on campus. If you have any questions, please reach out to* SGEF\_Council@usf.edu.

***Note: You must obtain a physical signature from each stakeholder. A digital signature may be obtained during COVID-19 closures or whenever applicable.***

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| --- | --- |
| Name: |  |
| Title: |  |
| Department: |  |
| Email: |  |
| Reasons for Collaboration |  |
| Signature: |  |

***\*By signing I confirm that I have reviewed this application and that I understand the implications of its implementation, including any budget items that may impact me or my department.***

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| Name: |  |
| Title: |  |
| Department: |  |
| Email: |  |
| Reasons for Collaboration |  |
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| Name: |  |
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