**Advisor Statement for Funding Request**

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| **Proponent(s) Investigator(s):** |  |
| **Research Group:** |  |
| **Advisor:** |  |

|  |  |
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| **Advisor's opinion:****I authorize** [ ] **I do not authorize** [ ]  |  |
| **Date** |  |
| **Signature of the Advisor** |  |

**Note:** You must attach the funding request form and send it to your advisor.