



Office of Research Services
Phone: (250) 807 9412

UBC Okanagan Campus INTERNAL CO-APPLICANT SIGNATURE FORM *(To ACCOMPANY RPIF)*

UBC Co-Applicants

UBC Co-Applicant		
Name	Signature	Date
Department /Unit Head/Dean **		
Name	Signature	Date

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** Note: This form is only required if the internal co-applicant is from a different department than PI