

## Return to Research Plans Approval Authorization

**I. PREPARED BY:** \_\_\_\_\_

Date Prepared: \_\_\_\_\_

Building: \_\_\_\_\_

Lab Number: \_\_\_\_\_

Department: \_\_\_\_\_

**II. CHAIR NAME:** \_\_\_\_\_

Chair Approval Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**III. DEAN/DESIGNEE NAME:** \_\_\_\_\_

Dean/Designee Approval Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IV. EHS REVIEWER NAME:** \_\_\_\_\_

EHS Approval Signature: \_\_\_\_\_

Date: \_\_\_\_\_