**WSU Chair/Director and/or Dean/ADR/VP/Chancellor Certifications**

Application No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I attest to the best of my ability and knowledge, that this application contents meet expected standards, and assure the corresponding research will be conducted in compliance with federal, state, and university rules, regulations, and policies. These representations, certifications and assurances include, but are not limited to the following:

1. I believe this research is being conducted on behalf of WSU. It is consistent with the mission and objectives of the University and meritoriously warrants consideration.
2. I certify and recommend that this individual is qualified to serve as Principal Investigator on this research project and that they have the appropriate credentials and experience to do so.
3. The space and unit resources necessary to support the research are available and will be made available as needed.
4. Any and all records generated from the work performed by this research will be maintained in accordance with WSU policies. The University retains title to these records and has the right to access the supporting records for all research for which it retains title.

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

Full Name:

Title:

College/Department/Center: