## PARTNER ORGANIZATION FORM - FOSTERING RESEARCH PARTNERSHIPS FUND

<u>For the partner organization representative</u>: After reading the completed Application Form, please print and complete the form below. Upon completion, please return this form to the applicant for submission with the remaining application materials.

## Partner Organization Representative Information

Identification (Partner Organization Representative)	
Last Name	First Name
Partner Organization Name	
Role within Partner Organization	
Name of UBC Applicant	
Statement of Consent	
I have read and consent to the submission of the Fostering Research Partnerships Fund Application Form completed by the applicant,(UBC Applicant Name). My organization is willing to meet with the applicant to discuss potential opportunities for collaboration.	
Partner Organization Representative Name (please print)	
Partner Organization Signature	