

Signature form

To be signed and uploaded as part of the digital form "Principal Investigator Assurance".

By signing this document, I certify that:

- 1) The information submitted within the submission is true, complete, and accurate to the best of my knowledge.
- 2) I am aware that any false, fictitious, or fraudulent statements or claims may subject me personally to criminal, civil, or administrative penalties.
- 3) I agree to accept responsibility for the scientific conduct of the project and to provide any required reports if a grant is awarded as a result of the application.
- 4) If submitting a grant application, I certify that the materials are the original work of the Principal Investigator.
- 5) If submitting a prior approval request, I certify that I have reviewed and approved the request.

Principal Investigator		
Name:	Signature:	Date:

This form is designed to comply with the requirements of NIH Notice NOT-OD-06-054, issued April 7 2006.