

## Team Grant Program/Dept Manager Statement of Support

Name of Principal Investigator (Applicant): \_\_\_\_\_

Program/Department.: \_\_\_\_\_

To the Team Grants Review Panel:

By signing this statement, I agree to support the above-named applicant to complete the research project described in the application, in the event it is funded in this competition. I will provide the following specific support, as indicated by "yes" or "N/A" (if not applicable):

\_\_\_\_\_ accommodating their work schedule to enable the research to be conducted, as much as is reasonable. We have discussed the impact of the research project on their work schedule.

\_\_\_\_\_ back-filling their normally assigned workload, in the amount budgeted for in the grant

\_\_\_\_\_ assisting with the hiring of project staff/consultants according to VCH/PHC policies and procedures

\_\_\_\_\_ other support (specify):

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

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