* REMOVE BEFORE COMPLETING LETTER: THIS LETTER IS REQUIRED ANY TIME A COST SHARE/MATCH IS REQUIRED BY THE SPONSOR. If more than one department has responsibilities to execute the specific aims of this application, additional signatures are required from the SLT member who oversee those departments. This includes commitment and/or participation from staff members and/or infrastructure support. These additional commitments should be captured in the below table.
* ALL SIGNATURES AND APPROVALS MUST BE OBTAINED AT LEAST 3 BUSINESS DAYS PRIOR TO THE SUBMISSION OF THE APPLICATION. DIRECT ANY QUESTIONS TO SABRINACARRETIE@HSL.HARVARD.EDU

Proposal Title:

Sponsor:

PI Name:

Senior Leadership Team Member Responsible:

Date: Click here to enter a date.

The above mentioned application that is due (INSERT DATE) to {INSERT SPONSOR} has a mandatory cost share or match requirement. The below table outlines the institutional and department Commitment from HSL, including the source of funding. As the responsible Senior Leadership Team member for this project, I acknowledge that a separate sponsored award account will need to be set up to track the cost share/match. I understand that the cost share funds must come from an HSL operating account or special purpose fund. The proposed cost share budget is included as an attachment to this letter.

|  |  |  |  |
| --- | --- | --- | --- |
| HSL Contributed Cost Share Type | Amount | Lead Financial Dept Responsible | HSL Account number that will be used to transfer funds |
| Choose an item. |  |  |  |
|  |  |  |  |
| Total  |  |  |  |

Approval from the Chief Financial Officer and Chief Executive Officer indicates institutional approval for this activity and allocation of operating budget to support the activities.

|  |  |
| --- | --- |
| Principal Investigator Name: Signature: | Senior Leadership Team Member Name: Signature |
|  |  |
| Chief Financial Officer: Jim HartSignature  | Chief Executive Officer: Lou WoolfSignature |