



C A R I C

CONSORTIUM FOR
AEROSPACE RESEARCH AND
INNOVATION IN CANADA

CONSORTIUM EN AÉROSPATIALE
POUR LA RECHERCHE ET
L'INNOVATION AU CANADA

Certification of Project Participation Form

Academic Participant

Type of grant requested: « Maturing-Technology» Program

Project title & project number:

Name of the industrial leader of the project and of its organization:

Name, Title, Organization of the academic participant:

Instructions : the following sections must be filled out by :

- *the participant involved in the project: section 1*
- *the representative of its research office for Universities or an equivalent representative for Colleges and Research Centres: section 2*

Section 1

I have read the research proposal related to the above-mentioned project, which will be submitted to the CARIC Scientific Committee for approval. I agree with the statement of work and structure of the project.

Name, Surname of the academic participant :

Signature :

Date :

Section 2

I have read the research proposal related to the above-mentioned project, in which one or several researchers from my organization will participate, and I agree to its content. If the project is approved for funding, a project agreement will need to be negotiated and signed among the project partners.

Name, Surname, Organization, Title:

Signature :

Date :