

**Canada Foundation for Innovation  
Innovation Fund (CFI IF)  
EOI Sign Off**

**Project Leader:** \_\_\_\_\_

**Department / Faculty / School:** \_\_\_\_\_  
\_\_\_\_\_

**Title of CFI IF Proposal:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*In my capacity as the designated Project Leader, (my colleagues and) I have prepared the attached CFI IF EOI. I confirm that space and utilities are available for installation of the requested infrastructure. If the EOI is successful, I will develop and submit an application, requesting funds from the CFI IF, in addition to requesting the required match funds as outlined in the attached EOI and future application.*

\_\_\_\_\_  
**Signature of Project Leader**

\_\_\_\_\_  
**Date**

*I have read and support the attached CFI IF EOI. I confirm that space and utilities are available for installation of the requested infrastructure. Through this application, I understand that, if the EOI is successful, funds will be requested from the CFI IF, in addition to requests being made for the required match funds as outlined in the attached EOI and future application.*

\_\_\_\_\_  
**Signature of the Department Head**  
(where applicable)

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of the Dean**  
(or representative)

\_\_\_\_\_  
**Date**