

American Diabetes Association's Research Program Pathway Final Progress Report Signature Page

Pathway Grant Reference #: _____

Project Title: _____

By signing below, I certify that this report is accurate, agree to accept responsibility for the scientific and technical or financial conduct of the research project, and agree to all terms and conditions of the aforementioned Pathway Award granted by the American Diabetes Association.

Principal Investigator Signature

Date _____

Department Chair Signature

Date _____

By signing below, I certify that this Final Progress Report is an accurate account of expenses and obligations made in accordance with the current Pathway Association grant regulations made for the purposes outlined in the application, online, and award package.

Financial Officer Signature

Date _____