

Approvals and Signatures
PROOF OF CONCEPT AND CLINICAL TRIALS

Approvals

<p>Project Leader</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Project Leader Employer Approval</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
<p>Co-Investigator</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Co-Investigator Employer Approval</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
<p>Co-Investigator</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Co-Investigator Employer Approval</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
<p>Co-Investigator</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Co-Investigator Employer Approval</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
<p>Co-Investigator</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Co-Investigator Employer Approval</p> <p>Name: _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>