**FY25 Core Facility Voucher Program Cover Page**

**Date of Application**:

**Full Name of the Core Facility**:

**Department/Unit of the Core Facility**:

**Name of the Core Facility director**:

**Name of the facility manager**:

(responsible for the day-to-day management)

**Name of the contact person**:

(for this proposal)

**Proposal Title**:

**Amount requested**:

(max = $2,000 excluding GAR/GIR (GAIR). GAR/GIR (GAIR) will be not covered by RIO)

**Signatures of the PI and Core Facility director**

(these signatures will constitute acknowledgement that the request has been discussed and approved)

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**PI (applicant) Core Director/Manager**

[Name] [Name]

[Title/Position] [Title/Position]

[Dept/Unit] [Dept/Unit]

\*: The PI and the Core Director/Manager can be the same person. In this case, please include a second administrative signatory for increased awareness of your activity.