Semi-Annual Declaration (G3)

BARD Project Number:

Institution Reference Number:

|  |  |
| --- | --- |
| Name of Institution: | Research Year |
| \_\_\_ First |
| \_\_\_ Second |
| \_\_\_Third |

We certify that the research of the above mentioned project is being carried out in our institution and in the cooperating institution(s) in accordance with the approved research and budget plans.

In order to enable us to continue with our research, we request payment of the next installment as per our agreement.

Date:

Institution’s Authorizing Official:

 Signature

 Name

Institution’s Stamp

PI or Co-PI of the Project:

 Name Signature