Radiology Data Analyst Project Approval

Principal Investigator: ________________________________

Position: □ Faculty □ Fellow □ Resident □ Staff □ Other ____________

Radiology Division:
- □ Abdominal
- □ Breast
- □ Cardiothoracic
- □ Community
- □ Emergency & Trauma
- □ Interventional Neuroradiology
- □ Interventional
- □ Musculoskeletal
- □ Neuroradiology
- □ Pediatric
- □ Nuclear Medicine
- □ Research

Project size (as determined by Archana Kudrimoti):
- □ Small ($600) □ Medium ($1200) □ Large ($3000) □ > 40 hours ($3500+)

Division Director approves this project and verifies that:
- □ principal investigator has their own funds to support. Smartkey: ________________
  OR
- □ the division will provide funds to support. Smartkey: ________________

Division Director Name: ________________________________
Division Director Signature: ________________________________
Date: ____________________