

# SCFF Project Response Form

NOTE: If you have no feedback for questions 1-3, please leave blank.

\* Required

1. Your Name \*

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2. Name of SCFF Project \*

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3. Provide your general remarks on this project.

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4. Provide any suggestions that may help move the project forward.

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5. Please state any new commitments to support this project through knowledge you have, connections, or raising awareness.

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6. Thank you. Your comments will be shared with the Project Lead.

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