



Airport Fire Officer (A.F.O.) ARFF Applied Research Project (ARP) Proposal Form

Part B: ARFF Applied Research Project (ARP) Proposal Evaluator Feedback	
A.F.O. Participants Name	
Title of ARFF Research Topic	
Date Evaluator Feedback Provided	
Method Used to Provide Feedback (Check One)	<input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Telephone
Mark one of the following	<input type="checkbox"/> Topic Approved <input type="checkbox"/> Topic Disapproved
Revision Required?	<input type="checkbox"/> Please Resend
Evaluator Comments	