**Transportation Pooled Fund Study Request Form**

*Please complete all sections in Blue*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TPF Study Title**  **& Number:** | | | | Click or tap here to enter text. | | | | | | | | | |
| **Lead State:** | | | | Click or tap here to enter text. | | | | | | | | | |
| **Requestor(s):** | | | | Click or tap here to enter text. | | | | | | | | | |
| **FHWA Status of Study:** | | | | Click or tap here to enter text. | | | | **Partners:** | | | | Click or tap here to enter text. | |
| **Length of Study:** | | | | Click or tap here to enter text. | | | | **Participation Terms:** | | | | Choose an item. year commitment | |
| **Total Commitment:** | | | | Click or tap here to enter text. | | | | **Project Completion Year:** | | | | Click or tap here to enter text. | |
| **Year:** |  | **Amount:** |  | | **Year:** |  | **Amount:** | |  | **Year:** |  | **Amount:** |  |
| **Year:** |  | **Amount:** |  | | **Year:** |  | **Amount:** | |  | | | | |
| **Justification for the Request:** | | | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | | | |
| **Explanation of Benefits for TDOT:** | | | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | | | |
| **Division Director:** | | | | Click or tap here to enter text. | | | | | | | | | |
| **Director Signature:** | | | |  | | | | | | | | | |
| **Date Submitted:** | | | | Click or tap to enter a date. | | | | | | | | | |

**FOR INTERNAL PURPOSES ONLY**

|  |  |  |
| --- | --- | --- |
| **Terms:** |  |  |
| **ROTF Chair:** |  |  |
| **Signature:** |  | Date: |
| **Program Monitor:** | Jennifer Downs |  |
| **Signature:** |  | Date: |
| **LRPD Director Signature:** | Matt Meservy |  |
| **Signature:** |  | Date: |