EW&A GTARC UARC APPROVAL FORM-FMS

Name of the Organization and Program   **Associated Core Competency**

Specifically state requirement AND how it aligns with selected Core Competency

Is a Small Business currently performing this work?   Yes   NO   If Yes, Contract #

Base Period of Performance (PoP)   **Total PoP w/Options**

Desired Award Date   **FUNDING**
Type of Funds / Fiscal Year

Severable vs. Non-Severable

Available Funding $ Amount

Base Period $ Amount Total

Value with Options   **FM Approval**

External Org Funds
(List Origination(Funding Source)   **ACQ Strategy**

Internal ES Org CCAR# and PE
   Program Element (PE)   ACQ Strategy Complete?

POC CERTIFICATION - **My signature certifies that the stated requirement specifically aligns with the Georgia Tech Research Institute (GTRI) Core Competency selected above. It also certifies that I have read the EW&A UARC Ordering Guide and the Contract DD254, and will comply with the specifications.**

REQUIREMENT APPROVAL AUTHORITY (IPT Lead / Supervisor or Equivalent)

FMS REQUIREMENT APPROVAL AUTHORIY
(Chief, Electroinic Warare FMS)

Email PWS and Signed Form to EW GTARC UARC Program Office
Do Not Write Below This Line

ESY Leadership Briefing Complete   Date Complete

EN - **After review, it is determined that this requirement**   **Approval Authority** - **Comments** (if applicable)

Approved   **Disapproved** (Reason for Disapproval) **is**   **Approved**   **Disapproved**

Validation of EN Approval   **Validation of Proper Approval Authority**

Request Approved Routing
COMMENTS

PCO **Control Number**

Form Revision: 20 Jan 2026