

|   |               |   |  |                                |      |
|---|---------------|---|--|--------------------------------|------|
| UNITED STATES<br>ENVIRONMENTAL PROTECTION AGENCY<br>Washington, DC 20460  |               | EPA FELLOWSHIP<br>ACTIVATION NOTICE<br><i>(Please complete by typewriter)</i> |  | FELLOWSHIP NO.                 |      |
|   |               |   |  | DATE FELLOW WILL ENTER ON DUTY |      |
| NOTICE: All checks will be mailed to any address requested by fellow, except for tuition and fees which will be mailed to the sponsoring institution. |               |   |  |                                |      |
| NAME OF FELLOW  |               |   | NAME OF SPONSORING INSTITUTION                                   |                                |      |
| MAILING ADDRESS FOR STIPEND CHECK <i>(Include ZIP Code)</i>   |               |   | MAILING ADDRESS FOR INSTITUTION CHECKS <i>(Include ZIP Code)</i> |                                |      |
| FOR EPA USE ONLY  |               |   |  |                                |      |
| DATE OF AWARD NOTICE  |               | OBJECT CLASSIFICATION CODE  |  | VENDOR CODE                    |      |
| ACCOUNT NO.   |               |   | APPROPRIATION NO.  |                                |      |
| STIPEND   |               |   | AWARD PERIOD   |                                |      |
|   | MONTHLY<br>\$ | FROM  | THROUGH  |                                |      |
|   | TOTAL<br>\$   | SPECIAL INSTRUCTIONS  |  |                                |      |
| BOOK ALLOWANCE  | \$            |   |  |                                |      |
| TUITION AND FEES  | \$            | LEVEL<br><input type="checkbox"/> AGENCY <input type="checkbox"/> SPECIAL     |  |                                |      |
| TOTAL AWARD   | \$            | PREPARED BY   |  | DATE                           |      |
| REMARKS   |               |   |  |                                |      |
| SIGNATURE OF FELLOW   |               |   | AREA CODE  | TELEPHONE NO                   | DATE |
| <b>APPROVING SIGNATURE</b>  |               |   |  |                                |      |
| SPONSOR OR DEPARTMENT HEAD <i>(Please Indicate)</i>   |               |   | AREA CODE  | TELEPHONE NO                   | DATE |
| INSTITUTION OFFICIAL RESPONSIBLE FOR PATENTS  |               |   |  |                                | DATE |

## **Paperwork Reduction Act Burden Statement**

The public reporting and record keeping burden for this collection of information is estimated to average 30 minutes per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimate, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques, to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

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