

NOTE: The Fellowship Agreement must be completed in original and three copies. The original and first two copies must be returned to the Grants Administration Division within 3 weeks after receipt or within any extension of time as may be granted by EPA. Except as may be otherwise provided, no costs may be incurred prior to the execution of the Fellowship Agreement by parties thereto. Receipt of a written refusal, or failure to return the properly executed document within the prescribed time, will result in the automatic termination of consideration of the fellowship offer by the Agency. Any amendment to the Fellowship Agreement by the fellow subsequent to the document being signed by the Award Official shall void the Fellowship Agreement.

PART I GENERAL INFORMATION

1. FELLOWSHIP ADMINISTRATION DATA		2. APPROPRIATION AND ACCOUNTING DATA	
a. STATUE REFERENCE	b. REGULATION REFERENCE	a. APPROPRIATION	b. ACCOUNT NUMBER
c. FELLOWSHIP PROGRAM		c. OBJECT CLASS CODE	
3. AWARD APPROVAL OFFICE		4. ISSUING OFFICE	
a. ORGANIZATION		a. ORGANIZATION	
b. ADDRESS		b. ADDRESS	

5. PROJECT OFFICER (<i>Federal Contact</i>)	
a. NAME	d. ADDRESS
b. TITLE	
c. TELEPHONE NUMBER (<i>Include Area Code</i>)	

6. FELLOW	
a. NAME	b. ADDRESS

7. SPONSOR	
a. NAME	d. ADDRESS
b. TITLE	
c. TELEPHONE NUMBER (<i>Include Area Code</i>)	

8. AMOUNT	a. TUITION AND FEES	PAID TO INSTITUTION	\$
	b. BOOKS AND SUPPLIES (May not exceed \$250.)	PAID DIRECT TO FELLOW	\$
	c. STIPEND		\$
	TOTAL AMOUNT OF FELLOWSHIP		\$

9. DURATION (Approved dates of fellowship: 12 months or less):	
FROM:	TO:

10. PAYEE (For Institutional Allowances)		11. FELLOW'S NAME AND ADDRESS (<i>For stipend check</i>)	
a. NAME		a. NAME	
b. TITLE		b. ADDRESS	
c. ADDRESS			

PART II

SPECIAL CONDITIONS *(If any)*

(Continue on blank sheet if more space is needed)

PART III

OFFER AND ACCEPTANCE

The United States of America, acting by and through the U.S. Environmental Protection Agency (EPA), hereby offers a Fellowship to _____ for all approved costs up to and not exceeding _____ for the support of the effort described in [FELLOW] [FELLOWSHIP AMOUNT] application dated _____ *(Including all application modifications)* included herein by reference.

This Fellowship Agreement is subject to applicable U.S. Environmental Protection Agency statutory provisions, fellowship regulations (40 CFR, Part 46) and of the provisions of this agreement (Parts I thru III). The Fellow also agrees that funds awarded will be used solely for the purposes of the program as approved.

THE UNITED STATES OF AMERICA BY THE U.S. ENVIRONMENTAL PROTECTION AGENCY

AWARD OFFICIAL

SIGNATURE	TYPED NAME
TITLE	DATE

BY FELLOW

SIGNATURE	TYPED NAME	DATE
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Paperwork Reduction Act Burden Statement

The public reporting and record keeping burden for this collection of information is estimated to average 1 hour 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.

EPA Form 5770-8