Approval expires: 04/2012

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U.S. ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460

Form Approved OMB No. 2030-0020

	FELLOWSHIP FACILITIES AND		
	INSTRU	CTIONS	
Applicant must complete Items 1 through 5 and then forward form to sponsor for his completion. The sponsor should complete the remainder of the form and forward it in the enclosed self-addressed envelope. Applicant must affix necessary postage.			
		D BY APPLICANT	
Applicant's Name		2. Department	
3. School, College, or other Major	Division	4. Institution	
5. Type of Fellowship			
☐Agency	☐Special TO BE COMPLET	Full Time ED BY SPONSOR	☐Part Time
This certifies that if a fellowship, as checked below, is awarded adequate facilities and supervision will be provided.			
6. Applicant is a degree candidate		e expected to complete Requiremen	
☐Yes ☐No	degree by (month and year):		
	9. TITLE AND FULL-INSTITUTIONA FINANCIAL OFFICIAL TO WHOM C		10. DOES PROPOSED FELLOWSHIP INVOLVE WORK WITH HUMAN SUBJECTS OR EXPERIMENTAL ANIMALS?
if applicable)			□Yes □No
Fees Per Year			
 11. COMMENTS OF SPONSOR a. Summarize your plans for applicant's training including information which will assist in the evaluation of applicant. This proposed training and facilities available to him. Include projection of course schedule providing course number, title, and credit hours to be taken. (Use continuation pages if necessary). b. If you are the program director of an EPA Training Grant, state what relationship this fellowship (If awarded will have to that program. (Use continuation page if necessary). 			
12. Sponsor's Signature	13. Typed Name	14. Area Code/Tel. No	15. Date
T∩ RF	COMPLETED BY INDIVIDUAL AUT	 	FUTION
16. Signature	17. Typed Name	18. Area Code/Tel No.	19. Date

EPA Form 5770-3 (Rev 04/2012)

PREVIOUS EDITION IS OBSOLETE