|  |  |
| --- | --- |
| 1. Name of Fellow: (Last, First, Middle)
 | Preferred Pronouns and Name (if different from legal name) |
| 1. Type of Fellowship: □ Local □ Foreign □ PhD Incentive Grant □Alternate Study (Sandwich) Grant
 |
| 1. Department/Institute
 | 1. College
 | 1. Constituent University
 |
| 1. Position and Rank
 |
| 1. Duration of Fellowship

 Start Date: End Date: |
| 1. Program enrolled in:

 □ Master’s □ PhD □ Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Degree Program | College | University |
|   |  |  |
| 1. Liquidation of Funds
 |
|  | Academic Year | ApprovedCash Advance\* | LiquidatedCash Advance | Balance | Unused Cash Advance Returned to CU Acctg Office |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| (Attach certification of fund balances from the Accounting Office as Annex 4) \* Indicate only the tuition, school fees, airfare, etc. Do not include the Research Award since this is not for liquidation. |
| 1. To certify the correctness of this form, please attach the following:
2. Annex 1a, Certification from Program Adviser
3. Annex 1b, Copy of diploma
4. Annex 1c, Copy of certification of completion of degree
5. Annex 2, Copy of Liquidation Report submitted to CU Accounting Office
 |
| ***This is to confirm the accuracy of the information provided in this form and to consent to its use in accordance with data privacy regulations of the university:***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fellow’s Name, Signature, and Date |
| ***In endorsing this terminal report, we are renewing our commitment to ensuring the success of the fellow. We will continue to engage in effective communication with the OVPAA regarding the applicant's progress. We will make every effort to facilitate the applicant’s return to duty upon conferment of the degree.*** |
| Chair/Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name, Signature, and Date | Dean\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name, Signature, and Date |
| Vice-Chancellor for Academic Affairs\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name, Signature and Date | Chancellor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name, Signature, and Date |
| **Approval**  |
| **□** Completion of Fellowship (Graduate) **□** For compliance of Terminal Report requirement \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name, Signature, and DateVice President for Academic Affairs |

**Annex 1a. Certification of Degree Completion from Adviser**

This is to certify that NAME has completed the requirements for the degree of PROGRAM under my supervision. The student has also made progress in the following:

□ Passed dissertation defense

□ Graduated (Date of graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

□ Dissertation stage (Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

□ Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed,

ADVISER’S NAME

ADVISER’S TITLE/POSITION

DEPARTMENT/INSTITUTION

DATE

**Annex 1b. Copy of diploma.** Note: You may attach a photo or a screenshot.

**Annex 1c. Copy of certification of completion of degree.** Note: If applicable, you may attach a photo or a screenshot.

**Annex 2. Copy of Liquidation Report submitted to CU Accounting Office.** Note: This must be signed and endorsed by CU Accounting Office.