

	August 6, 202	0												
	John Doe PO Box 00000 City, State ZIP UAF ID: jdoe@alaska.e)												
	Dear Mr. Doe,													
	Congratulations! I am pleased to inform you that you have been awarded the [Fellowship Name] Fellowship.													
	This fellowship provides a monthly stipend in the amount of \$0000.00 and will start [Month Day, Year] and will continue through [Month Day, Year]. [Provide anything extra or requirements in this section, ex: It also provides tuition for nine graduate credits for the fall 2020 semester and payment of graduate student health insurance. You are required to maintain at least full time student status during the fellowship (9 credits per semester).]													
	charge or self e	A de payment of elected fees. Thes s for each semest	e fees are	А	е	i		fo	atl	a t	nine	credi	ts during Fall	2020]
nough federal income tax will EK ble withheld from your ncome to you and needs to be reported as income on your ov (Ç) (CE %GE Ço Á] š Z 丞 Zo š] v (CE š ÆE . 知) e š Z / Z ^ determine your tax liability and how to make estimated tax not be issued to you.														
e accepting or de	dining this awa	and its conditi	ons by											
required criteria	3													

Date