WSGC Federal Funding Report Guidelines *Submit form along with award acceptance documentation*

WSGC FUNDING INFORMATION

WSGC Award Number (Refer to Award Letter): Example: (RFP<YR>_1.0, LSC<YR>_1.0, etc.) First Name: Last Name: Institution:

Project Title: Period of Performance Begin Date: Period of Performance End Date:

ADDITIONAL FEDERAL FUNDING INFORMATION

Source: Example: (NSF, NIH, etc.): Award Number: Period of Performance Begin Date: Period of Performance End Date: Award Amount:

□ I certify that the activities (salary, fringe, materials, supplies, travel, etc.) supported through Wisconsin Space Grant Consortium funding are not supported through additional federal funding during the same period of performance.

□ I have included a copy of the additional federal funding budget for the period of performance overlapping the Wisconsin Space grant Consortium funding period of performance.

Name (Printed)

Name (Signed)

Date