CAREER PATHWAYS
in Public Health Laboratory Science
An APHL-CDC Initiative

Fellowship Project Supply Funding Attestation Document

By signing below, I, the mentor, attest that the items/supplies/consumables listed in my 'Fellowship Project Supply Funding Final Submission' form have been utilized for the purpose of the fellowship project described below.
The information regarding the purchase and use of the items/supplies/consumables listed in my 'Fellowship Project Supply Funding Final Submission' form is true, accurate and complete to the best of my knowledge for my fellow listed below who is participating in the Public Health Laboratory Fellowship Program: an APHL-CDC Initiative.

Mentor Name:

Fellow Name:

Description of Fellow's Project:

Mentor signature: Date: