College of Communication and Information

*Graduate Program in Communication*

# Research Fellowship Reporting Form

Student Name: _____ Faculty Advisor Name: _____

UKID: _____

**Fellowship Area of Study/Specialization:**

**Please list the task the student completed as part of their 40-hour commitment to the fellowship program below.**

**Please attach the following items to the document:**

- Conference submission confirmation, acceptance letter, or prgram schedule for fellowship project
- Journal submission confirmation, acceptance letter, or complete citation of already published

I confirm that the student has completed the requirements to be recognized for the research fellowship.

_____ _____

Faculty Advisor Signature Date