

FULBRIGHT FOREIGN LANGUAGE TEACHING ASSISTANTS PROGRAM

ACADEMIC YEAR 2020-2021



GRANT AUTHORIZATION

Grantee (name/last name)		Date of Issue (day/mo./yr.) 09/07/2020 Program and Year: FFLTA-2020
Permanent Address: Street: Zip Code/City: Province/Country:		Grant Category: Graduate Student
Project: Field/Specialization: Objective: Project Title:	Languages / Spanish Language Teaching Non-Degree	Managing Office Office of English and Special Services Institute of International Education (IIE) 809 United Nations Plaza New York , NY 10017-3580
Host Institution Department Division/School Name of Institution City, State, Zip Code		
Authorized Grant Period (day/mo./yr.):		Beginning date: Ending date:

Financial Provisions:

Roundtrip Travel	\$ 4,000.00
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Estimated Total: \$ 4,000.00

Personal Funds:	Grantees Tuition/Maintenance:	\$ 0.00
	Dependents: 0	\$ 0.00
	Spouse: NO Children: 0	Total Personal Funds: \$ 0.00

U.S. Government Provisions:

Health Benefit Plan: Accident and Sickness Program (maximum \$100,000)

Grantee signature and date:

Authorizing Officer and Institutional Seal:

Signature:

Alberto López San Miguel, Executive Director