

SCIENCE EDUCATION INSTITUTE
Department of Science & Technology

Accelerated Science & Technology Human Resource Development Program
(UP Diliman-ASTHRDP)

Liquidation Report SRSF Research / Dissemination Grant
(Publication / Conference)

NAME: _____

DATE: _____

DEGREE & COURSE: _____

START OF SCHOLARSHIP: _____

REQUIREMENTS CHECKLIST	<input checked="" type="checkbox"/>
Travel report	<input type="checkbox"/>
Liquidation report (with supporting documents: official tickets, boarding, original official reports, etc.)	<input type="checkbox"/>
Copy of Certificate of Attendance / Participation	<input type="checkbox"/>
Copies of pictures from the conference	<input type="checkbox"/>

**Note - All the requirements must be submitted the physical copy of original*

If for delivery:

Staff name: Samuel Montes Jr

Contact no.: 09486568304

Address: UP Diliman College of Science Admin Bldg., Graduate office, Q.C.

Drop off: Basement guard

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To be fill up by ASTHRDP Staff only...

EVALUATION: Complete Approved by Project Leader Disapproved

REMARKS:

EVALUATED BY: _____

DATE OF APPROVAL: _____