

Date: \_\_\_\_\_

I, Dr. \_\_\_\_\_, am writing in support of the SQuID Fellowship Application by \_\_\_\_\_ . If awarded, \_\_\_\_\_ will be able to travel to the host lab for the duration of the fellowship with no impact on their other sources of support.

Name: \_\_\_\_\_

Email address: \_\_\_\_\_

Position: \_\_\_\_\_

Academic Unit: \_\_\_\_\_

University or Institution: \_\_\_\_\_