



# UBC Okanagan Campus UNDERGRADUATE RESEARCH AWARD FINAL REPORT

Irving K. Barber School of Arts  
& Sciences

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*FOR ADMINISTRATIVE USE ONLY*

<i>DATE RECEIVED</i>
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<b><i>IDENTIFICATION</i></b>		
APPLICANT SURNAME:	APPLICANT GIVEN NAME:	
STUDENT ID#:	SUPERVISOR'S NAME:	
SUPERVISOR'S DEPARTMENT:	PROJECT NUMBER:	
APPROVAL DATE:	AMOUNT AWARDED:	AMOUNT SPENT:

**Summary Report:** State in clear, non-technical terms the accomplishments, findings or discoveries that may be of interest to decision makers and the general public.

<b>SIGNATURE SECTION:</b>		
<b>To BE COMPLETED BY FACULTY SUPERVISOR:</b>		
<b>PLEASE READ AND SIGN:</b> I (supervisor) certify that I have read this student report and that all information in this report is accurate to the best of my knowledge.		
<b>NAME:</b>	<b>SIGNATURE:</b>	<b>DATE:</b>
<b>To BE COMPLETED BY APPLICANT:</b>		
<b>PLEASE READ AND SIGN:</b> I (applicant) verify that all of the information contained within this final report is true and complete to the best of my knowledge		
<b>NAME:</b>	<b>SIGNATURE:</b>	<b>DATE:</b>

**Once completed, please send the form to Julie Martin, Assistant to the Dean of Research, Graduate & Post-Doctoral Studies, ASC 407.**