**INTERPROVINCIAL UNDERGRADUATE SUMMER RESEARCH AWARD**

**INSTRUCTIONS**

The first page of information and CV are provided/completed by the student. The supervisor generally completes the remainder of the form.

**Please complete the following form and append the following materials:**

**1. Curriculum vitae for student.**

**2. Covering letter from supervisor indicating:**

1. willingness to undertake the supervision of this research
2. feasibility of the proposed research
3. learning outcomes for the student
4. data on the supervision of undergraduate students in the last five years:

* *Names of undergraduate students supervised*
* *Peer-reviewed publications by the students*
* *Conference presentations with DVM undergraduates as authors*
* *Names of summer students who continued on to graduate work*
* *Assurance of animal care.*

**Students, submit applications to the appropriate department head by January 12, 2024.**

**Department heads: please forward all applications from your department to** [**wcvm.research@usask.ca**](mailto:wcvm.research@usask.ca)**with rankings of all applications by January 19, 2024.**

**INTERPROVINCIAL UNDERGRADUATE SUMMER RESEARCH AWARD APPLICATION**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NSID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**☐ Canadian or Permanent Resident If so, which province are you from?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**☐ Non-Canadian**

**Supervising faculty member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Does the project fall within any of the following areas of research?**

**☐ Companion animal ☐ Equine ☐ Food animal ☐ Biomedical/Clinical**

**Proposed initiation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Completion date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(usually from May 1 to August 15)*

**Signatures:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Student WCVM faculty supervisor

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Department Head Associate Dean, Research and Graduate Studies, WCVM

**Permission from student for the WCVM Associate Dean, Research and Graduate Studies, to access their academic records:**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of student) give permission for the Associate Dean, Research and Graduate Studies, to access my academic records as held at the WCVM for the purpose of evaluating my application for this award.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Student)*

**1. Background information** (include preliminary work, pertinent references and rationale)**:**

**2. Objectives:** (list)

**3. Research plan:**

**4. Describe the role of the student in the research project and outline the time involvement of the student. Outline the complete experience in research that the student will gain over the summer.**

**5. Budget** *(indicate source of funding to support this research and list anticipated expenditures - major items only***):**