



Office of Undergraduate Research & Scholarship University of Alaska Anchorage Consortium Library Prize

Project Title: _____

Semester Project Completed: Spring Summer Fall Year: _____

Was this project completed in the context of UAA coursework? Yes No

If yes, course number and title: _____

Student Name: _____ Student ID Number: _____

Address: _____

E-mail: _____ Phone Number(s): _____

Degree Program: _____ Campus: _____

Major: _____ # credits enrolled (current semester): _____

Student's Signature*: _____

Faculty Mentor: _____ Department/College: _____

I certify that this project was completed under my supervision and in accordance with the standards of Research Integrity and Compliance at UAA.

Faculty Mentor Signature*: _____

Please attach your project, following the application guidelines at www.uaa.alaska.edu/ours.

For more information on Research Integrity and Compliance, visit www.uaa.alaska.edu/research/ric.

Submit to: Office of Undergraduate Research & Scholarship, RH 115

Note: ***Unsigned applications are considered incomplete and will not be accepted.**

Questions, please contact the Office of Undergraduate Research & Scholarship 786-4874 or uaa_research@uaa.alaska.edu