

URI OFFICE OF UNDERGRADUATE RESEARCH AND INNOVATION
Project Completion Report

Date:

Project Title:

Primary Student Name:

Additional Student Names:

Project start date:

Project end date:

Faculty Mentor Name:

Department:

Abstract:

Provide a one-paragraph abstract so that readers who are not specialists in the subject will understand the purpose, results, and impact of your project.

Outcomes:

1. *What did you discover? Discuss your project's significant findings and accomplishments.*
2. *Comment on additional outcomes not directly associated with the project's objectives (e.g., partnerships formed, additional funding support gained, presentations)*

Lessons Learned:

1. *Reflecting on strategies and activities, what worked and what did not work?*
2. *What would you do differently next time?*

Lessons Applied:

1. *How will the lessons learned from this project affect your future work? Do you anticipate any long-term outcome from your project?*

Will you be presenting your project at a conference or showcase, and if yes, where and when?

Additional Comments (regarding the program, experience, etc):

Please submit report to: URI Office of Undergraduate Research

Email: uri2@etal.uri.edu

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Please use this page to show the approved budget and spending for this project.

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