**Non-KYCOM Affiliated Research Report Form**

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| **Student’s Name:** | **Class of:** |
| **Title of the Research Project:** |  |
| **Type of the Research Project (Case study, Bench Work, Review etc.):** |
| **Period of the Research Conducted:** |  |
| **Research Project Approvals by IRB or IACUC (if applicable)*** 1. **Date of Submission:**
	2. **Date of Approval/Exemption:**
 |
| **Abstract of the Research Project:** |
| **Name of Research Institution:**  |
| **Name of the Outside Principal Investigator:** |
| **Contact of the Outside Principal Investigator** |
| **Phone:** | **Email:** |
| **Manuscript Submission (Title, Authors, Affiliations, Journal):** |
| **Conference Submission (Title, Authors, Affiliations):** |

**Note: Please attach the proof of manuscript/conference acceptance and registration**