



a place of mind

# UBC Okanagan Office of Research Services GRANT INFORMATION FORM (GIF)

Office of Research Services  
Phone: (250) 807 9412

*\*MUST BE ACCOMPANIED BY RESEARCH PROJECT  
INFORMATION FORM (RPIF)*

<b>PRINCIPAL INVESTIGATOR</b>		
SURNAME:		GIVEN NAME:
<b>PROJECT INFORMATION</b>		
PROJECT PERIOD (DD/MM/YYYY):		
TITLE OF PROJECT:		
ABSTRACT OF PROJECT:		
<b>BUDGET</b>		
<b>BUDGET SUMMARY</b>	<b>AMOUNT</b>	<b>BUDGET DETAILS</b>
PAYROLL COSTS (SALARIES AND BENEFITS)		
MATERIALS, SUPPLIES AND EXPENSES		
EQUIPMENT		
TRAVEL AND LIVING		
UBC ANALYTICAL AND OTHER SERVICES		

OFF-CAMPUS CONSULTANTS/CONTRACT SERVICES		
DEPARTMENT OVERHEAD (IF APPLICABLE)		
<b>TOTAL:</b>		

<b>ACCOUNT INFORMATION</b>			
PLEASE COMPLETE EACH OF THE FOLLOWING:			
UBC ACCOUNT:	NEW	EXISTING	ACCOUNT #:
RESEARCH PROJECT INFORMATION FORM ATTACHED (REQUIRED)			YES
AWARD NOTICE, AGREEMENT, OR OTHER CORRESPONDENCE FROM COMPANY OR FUNDING AGENCY ATTACHED (REQUIRED).			YES