

FORM B: RESEARCH GRANT COMPLETION REPORT

SSHRC Small Explore Grant
Application Proposal Title: _____

Project Number: 31- _____

Start Date: _____

Lead Applicant's Full Name: _____

Remaining amount: \$ _____

Department: _____

Indicate whether you intend to spend the remaining amount or whether you would like it returned to the Committee:

Summary of investigation and indication of external sources to which you intend to seek further funding for this or a related project. **Attach a brief summary and list resulting reports or publications for the Committee to review.**

Inventory Information: (complete the following information concerning any equipment purchased by your Grant Fund.)

(1) Description of Books, Equipment, etc.:

(2) Location of Equipment and Books:

Please identify the Funding Agency(ies) and the title(s) of the research grant(s) you have applied for, as a result of the research that was generated from this SSHRC Small Explore Research Grant.

I certify that the information contained herein is true and complete.

Signature of Lead Applicant

Date

Please submit this completed form to the Office Research Services (ors@sfu.ca)