

LEAD AUTHOR AND INSTITUTION**(First Name – Last Name)**

(Institution Name, Institution City, Institution State/Province)

ACADEMIC BACKGROUND**Expected Year of Graduation/Program Completion:** (Your Information)**Major or Field of Study:** (Your Information)**Academic Level:** (Your Information)**Institution where the research was conducted**

(Institution Name, Institution City, Institution State/Province)

Co-author(s) and Affiliation(s)

(First Name – Last Name, Suffix if present, Institution Name, Institution City, Institution State/Province)

(Same)

(Same)

(...and so on with as many co-authors as you worked with...)

Title**(“The Title for your Abstract Research”)****Category:** (Category)**Funding Source(s)**

For Example: National Institutes of Health Grants (codes in parentheses), etc.

Statement of the Problem/Background

(Your Information)

Research Question/Hypothesis

(Your Information)

Research Design/Methods Used in the Investigation

(Your Information)

Results/Summary of the Investigation

(Your Information)

Interpretation/Conclusion of the Investigation

(Your Information)