

ABSTRACT

The Illinois Junior Academy of Science

CATEGORY	_____	STATE REGION #	8
SCHOOL	Albion Grade School	IJAS SCHOOL #	8025
CITY/ZIP	Albion/62806	SCHOOL PHONE	1-618-445-2325
SPONSOR	_____		
NAME OF SCIENTIST*	_____	GRADE	_____
NAME OF SCIENTIST	_____	GRADE	_____

* If this project is awarded a monetary prize, the check will be written in this scientist's name, and it will be his/her responsibility to distribute the prize money equally among all participating scientists.

PROJECT TITLE _____

Purpose: Select this sentence and state what you set out to investigate.

Procedure: Select this sentence and describe your procedure in a paragraph.

Conclusion: Select this sentence and briefly describe your results and conclusion.

The above form must be duplicated. (Student generated forms must be in essentially the same format.)

1. Limit Abstract to 3 paragraphs (about 200 words or less). a) Purpose - what you set out to investigate; b) Procedure - how you did it; c) Conclusion - based on your results.
2. Must be typed, single-spaced on the front of this form. DO NOT write on the back of this form.

This form MUST be displayed on the front of the exhibitor's display board. It may be reduced to 4.25' x 5.5'

