



UNDERGRADUATE RESEARCH AWARD (URA) APPLICATION FORM PART 2 (RESEARCHER)

This section **must be completed by the Proposed Researcher**. Researchers are expected to have received an auto-generated Submission ID from the student they are willing to supervise as part of the URA. Students are expected to have met with researchers beforehand to discuss opportunities. Please note that professors **are expected to submit** Part 2 applications before the URA deadline, and that only applications with both Part 1 (Student Form) and Part 2 (Researcher Form) completed will be considered for selection. If you require further information to complete the form, please reach out to the student, or to the URA team. By completing this form, you also attest to your ability to (in the event of a successful URA offer) adequately supervise your URA student.

Student Information

Student First Name*

Generic First Name

Student Last Name*

Generic Last Name

Student Submission ID Number*

1234567890

Student Email*

GenericStudent@myumanitoba.ca

Please refer to the information you would have received from your student.

@myumanitoba.ca only.

Researcher Information

Researcher Full Name*

Generic Professor

Researcher Email*

GenericProfessor@umanitoba.ca

Faculty of Researcher*

Faculty of Arts



This is the faculty that YOU (the Proposed Supervisor) are a part of.

Department of Researcher (**or Affiliate Health Institution for some College of Medicine faculty members**)

Title of Proposed Research

Generic Research Title

Will the research program involve any travel off-campus?*

Yes

No

250 Word abstract of proposed research:*

This is where the PROFESSOR/PROPOSED SUPERVISOR would fill out a general abstract of the research, namely the research the proposed/potential URA student would be involved in. This, along with other topics, is to be discussed between the student and proposed supervisor. Given the competitive nature of the program, some details may not be fully fleshed out at the time of application, so it is both the responsibility of the Supervisor and Successful URA Student to be in communication and regularly connect on matters concerning the URA and any duties/expectations.

567/250000

Outline of student's role*


Similar to the above, if the application/applicant is successful in receiving the URA, both the student and the supervisor are expected to communicate their expectations and needs to each other, especially in regard to the sort of work/research that will be done, and the student's role.

Expected quality of the training and mentorship to be received*

Similar to the above, if the application/applicant is successful in receiving the URA, both the student and the supervisor are expected to communicate their expectations and needs to each other, especially in regard to the level of training and mentorship.

256/250000

Researcher Signature*



A handwritten signature in black ink on a white background. The signature is stylized and appears to be a cursive name. Below the signature is a horizontal line.

[clear](#)

Must be completed by the chosen Faculty Member. See instructions below.
Use your mouse or finger to draw your signature above

Date of Researcher Signature*

Dec 25, 2025



Must be completed by the chosen Faculty Member. See instructions below.

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purposes of determining your eligibility for the Undergraduate Research Award and for communication with Vice-President's Office (Research and International). Your personal information may be disclosed to other educational institutions, government departments and co-sponsoring organizations. Information regarding awards may be made public. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act* (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2

[clear](#)

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By clicking on the [Submit](#) button below:

- I hereby certify that I have read and understood the instructions and information in this application and that all statements made in connection with this application are true and complete.
- I give consent to use my name in publicity related to the Undergraduate Research Award, if I am offered an award.

Communication between the student and the researcher is essential, in order to ensure that the Form is properly submitted as well as to ensure that the student and researcher mutually agree upon the terms and conditions of the Undergraduate Research Award (URA). Those who are successfully awarded are expected to follow through with all the plans outlined in the applications. For those who wish to significantly change the direction or focus of their research experience, please email ura@umanitoba.ca.

[Save and Resume Later](#)

[Submit Form](#)