

ABSTRACT

The Illinois Junior Academy of Science

CATEGORY _____ STATE REGION #

5 _____

SCHOOL _____ IJAS SCHOOL #

5023 _____

CITY/ZIP _____ SCHOOL PHONE _(815)664-

4601 _____

SPONSOR _____

NAME OF EXHIBITOR* _____ GRADE _____

NAME OF EXHIBITOR _____ GRADE _____

NAME OF EXHIBITOR _____ GRADE _____

NAME OF EXHIBITOR _____ GRADE _____

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

PROJECT TITLE

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. LABEL EACH PARAGRAPH.

2. Must be typed, single-spaced on the front of this form. DO NOT write on the back of this form.

3. THREE (3) copies of your COMPLETE paper are required at the State Science Project Exposition.

FOUR (4) copies of your COMPLETE paper are required for the State Paper Session Competition.

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

This form MUST be displayed on the front of the exhibitor's display board. It may be reduced to half a sheet of paper.