



APPLIED RESEARCH

Okanagan College
1000 KLO Road
Kelowna, BC V1Y 4X8
AppliedResearch@okanagan.bc.ca

APPLIED RESEARCH PARTNER REQUEST FORM		
Partner Name:	Address:	
Contact Name:	Title:	
Email:	Phone:	
Year Established:	Number of Employees:	
Type of Partner:		
Industry	Community	Academic

Describe your organization. Generally, what type of services or products do you provide?
What is your specific proposed innovation or question that you have for improvement to an existing product or service?
What expertise are you seeking from Okanagan College?
What resources (cash and in-kind) will you provide for the project?