**Externally Funded Research Project Submission**

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| **Contact Information** | | | |
| Date submitted |  | | |
| Name |  | | |
| Address |  | | |
| Phone |  | Email |  |
| **Collaborators (If applicable)** | | | |
| Collaborator name |  | | |
| Organization |  | | |
| Contact information |  | | |
| Role |  | | |
| Collaborator name |  | | |
| Organization |  | | |
| Contact information |  | | |
| Role |  | | |

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| --- | --- |
| **Project Information** | |
| **Title** | |
|  | |
| **Project description**. Briefly outline project goals, objectives, and alignment with MBFI priorities. | |
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| **Project methodology and site requirements**  Provide term of the project and itemized details on what is required from the staff and facilities managed by MBFI to conduct the project. *May require budget to submitted* | |
|  | |
| **Address questions and completed form to:** | |
| Mary-Jane Orr, General Manager  [mary.jane.orr@mbfi.ca](mailto:mary.jane.orr@mbfi.ca)  431-255-0011 | |
| **OFFICE USE ONLY** | |
| Accepted: Yes  No | |
| Project #: |  |
| Signature: |  |
| Date: |  |