**Externally Funded Research Project Submission**

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

|  |
| --- |
| **Project Information**  |
| **Title** |
|  |
| **Project description**. Briefly outline project goals, objectives, and alignment with MBFI priorities. |
|  |
| **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 Managermary.jane.orr@mbfi.ca431-255-0011  |
| **OFFICE USE ONLY** |
| Accepted: Yes [ ]  No [ ]  |
| Project #:  |  |
| Signature:  |  |
| Date: |  |