



The Centre for Bone
and Periodontal Research



McGill

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NEW PROJECT INFORMATION

DATE	<input type="text"/>
NAME OF PRINCIPAL INVESTIGATOR	<input type="text"/>
AFFILIATION	<input type="text"/>
NEW BONE CENTRE CLIENT	<input type="checkbox"/> No <input type="checkbox"/> YES

TITLE OF PROJECT	<input type="text"/>
NAME OF CONTACT PERSON	<input type="text"/>
TELEPHONE	<input type="text"/>
START DATE	<input type="text"/>
ESTIMATED END DATE	<input type="text"/>
PROJECT CATEGORY	<input type="checkbox"/> ACADEMIC <input type="checkbox"/> INDUSTRY

SERVICE	ESTIMATED NO. OF SAMPLES
MICROCT	
PIXIMUS	
FAXITRON	
HISTOLOGY – PARAFFIN	
HISTOLOGY – PLASTIC	
HISTOMORPHOMETRY	
OTHER (SPECIFY)	
INVESTIGATOR SIGNATURE:	

NOTES:
