

Squamish Facility Engagement – Application for project renewal

Name of physician requesting funds	Name of project in FEMS
How much was this project funded for last year (approximately)?	
What were the outputs of the project last year?	
How much are you requesting for this year?	
What activities will this fund (e.g. meetings, development of guidelines, data analysis)?	
Approximately how many physicians will be participating?	
Do you anticipate Health Authority involvement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
What are some intended outputs your project will produce?	