

**RESIDENT PROJECT – RESEARCH
FAMILY MEDICINE, WESTERN UNIVERSITY**

	Resident Name	Faculty Advisor Name	Family Medicine Site [ie. SJFMC, Hanover]	Indicate one Faculty Advisor as Project Lead
1				
2				
3				
4				
5				

Provide the following information for the final writeup.	
Title of project	
Abstract [less than 250 words]	
Preference for presentation type at Resident Project Day [June PGY2] [Poster or Oral presentation]	
Journal targeted for publication	