

NZ Dental Research Foundation

and MoH Oral Health Research Fund

**Final Report**

Report Date: Click or tap here to enter text.

Principal investigator:

Co-investigators:

Project Title:

Fund: New Zealand Dental Research Foundation/Ministry Of Health Oral Health Research Fund

*(delete as appropriate)*

Start date: Day/Month/Year End date: Day/Month/Year

Funder Reference No:

Sum awarded: $ Sum expended: $

Funds to be returned: $

**Project aim(s):**

Click or tap here to enter text.

**Significant findings:**

Click or tap here to enter text.

**Plans for publication of the research:**

Click or tap here to enter text.

**Abstract for NZDA News, including; background, methods, results, and conclusion:**

Click or tap here to enter text.

***If any publications have resulted from this grant award, please list these below and include copies of these publications when submitting your report.***

Signed: Dated:

(Principal Investigator)