# Section 1: Principal Investigator Information

### 1. Principal Investigator:

First Name:	Last Name:	Designations:
Present Position:		
Title:		
Department:		
Institution:		
Mailing Address:		
City:	Province:	Postal Code:
E-Mail Address:		
Phone:	I	Fax:
	search will be conducted (comple	ete only if different from above):
City:	Province:	Postal Code:
Outline your role as ap	plicant for this project:	<u> </u>
List all collaborators ar	nd their contribution in project: _	

2025 Brain Tumour Elevation Research Grant Application: Brain Tumour Foundation of Canada

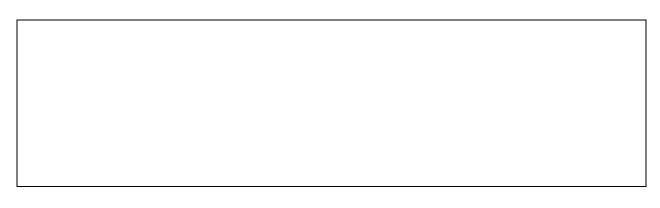
 Please attach a mini Curriculum Vitae for the principal applicant for the last five (5) years only. Maximum – two (2) pages.

## **Section 2: Project Information**

7.	Title of Proposed Research:		
	6a:	Please indicate the type of research you will be conducting. Please refer to page 1 of the "2025 Outline & Guidelines" for definitions.	
		Basic Research	
		Clinical Research	
		Translational Research	
		Population Study	
Use	e of Hun	nan Subjects: Yes No	
Use	e of Res	earch Animals: Yes No	
If y	es anyw	here above, please specify:	
Wh	ere rese	earch involving human and/or animal subjects is indicated, applications will be reviewed as to the	
scie	entific vo	alidity of the project. Confirmation of approval of ethics, would be required if successful, within	
60	days of	receiving notification of receiving award. If you haven't already, please attach (proof of	
sub	mission	for approval, or the actual approval) with your application.	

Please be brief and follow the instructions for the following sections.

8. In the space provided below, please provide a brief summary of your project that can be used for publications of Brain Tumour Foundation of Canada. Please describe the implications of this research project for brain tumour patients. Maximum – 200 words.



- 9. Please provide an outline of the research on not more than three (3) attached pages using TIMES ROMAN 12 POINT FONT. The outline will be rated on the following six points:
  - *a.* Purpose of the research
  - b. Background information
  - c. Formulation of the objective of hypothesis
  - d. Research design
  - e. Expectations
  - f. Possible pitfalls
  - g. References if appropriate (2 page max)

**IMPORTANT:** As much as possible, the outline of the research should be written in lay terms. The members of the Research Committee of Brain Tumour Foundation of Canada, who will be reviewing the grant applications, are from many different backgrounds: medicine, industry, business, philanthropy, psychology etc. If you feel it is necessary to use complex terminology, please ensure terms are explained. The Research Committee may also seek the help of outside reviewers.

## Section 3: Budget Breakdown

- 10. Budget Total Requested: \$\_\_\_\_\_
- 11. Other funds applied for related to this project and what those funds would be used for:

12. Other funds received related to this project and what they will be used for:

13. What are your plans for this project if funding is not obtained?

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Provide a general description of the budget needs of this project:

Provide a detailed description of the first year budget needs of this project, in the table below: Only direct costs associated to research are accepted. <u>No overhead costs will be accepted</u>.

Item	Details	Amount Required

Please provide details of anticipated impact and future potential of the project to advance in a meaningful way, if an additional \$50,000 is awarded in year two:

# Provide a detailed description of the second year budget needs of this project, in the table below: Only direct costs associated to research are accepted. <u>No overhead costs will be accepted</u>.

Item	Details	Amount Required

All funds are paid to the order of the institution and mailed to the institution's business/finance office directly. In the event that you are awarded funds for your project, the following information is needed to help us process the award in a timely manner.

### Name of contact at the Institution's Business/Finance or Accounting Office:

Contact's Title:

Contact's mailing address:

Contact's Phone Number & Email address:

Electronic Funds Transfer Information (EFT):

Also, please provide the contact information for **media inquiries** for your institution:

### **Section 4 – Signature and Submission Confirmation**

### All applications must include the following:

- □ Completed application form (submit as ONE PDF lastname\_firstname\_Grant applied\_year)
- □ Mini Curriculum Vitae for the Applicant for the last five (5) years only. Maximum two (2) pages
- □ Research Project Summary in Lay Terms
- □ Research Project Full Description
- □ Proof of submission to ethics board, or ethics approval, where applicable (must be provided within 60 days of receiving award, prior to fund dissemination)

Applications that are incomplete or do not conform to the guidelines <u>will not be reviewed</u>. This includes signature of applicant which affirms all statements made in the application are true.

Signature of Principal Applicant	cipal Applica	ant
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Date

Name of Principal Applicant (print or type)

## **DEADLINE FOR APPLICATIONS**

Grant applications must be received electronically by **April 1, 2025, 4:30pm ET**. The selection process and approval will take place shortly after and the results will be communicated to all applicants by **June 2025**.

Please email your application as ONE PDF directly to Susan Ruypers: sruypers@braintumour.ca