The Hitchcock Foundation

One Medical Center Drive

Lebanon, NH 03756

PILOT RESEARCH GRANT LETTER OF INTENT COVER PAGE

|  |
| --- |
| **Title of Research Project:**  |
| **The project will use human subjects** [ ]  **Yes** [ ]  **No***If yes, please contact the D-H IRB for additional information and/or assistance*: [*Dartmouth Health Human Research Protection Program (HRPP) & Institutional Review Board (IRB) (hitchcock.org)*](https://one.hitchcock.org/intranet/education-research/hrpp-irb) |
| **The project will use or disclose Protected Health Information** [ ]  **Yes** [ ]  **No***If yes, please review the Research Data Handbook and contact the Dartmouth Health SYNERGY Informatics group for additional information and/or assistance:* [*Dartmouth SYNERGY – Clinical and Translational Science Institute*](https://synergy.dartmouth.edu/) |
| **The project will use live animals** [ ]  **Yes** [ ]  **No***If yes, the project is subject to Federal Guidelines for Animal Research. Please contact the IACUC for additional information and/or assistance.* [*Institutional Animal Care and Use Committee (dartmouth.edu)*](https://www.dartmouth.edu/iacuc/) |
|  |
| **Amount Requested:** | $ | *Not to exceed $50,000.* |
| Does this project currently have funding?[ ]  Yes [ ]  No  | Source: |  |
| Is the project being submitted to other funding sources? [ ]  Yes [ ]  No | Source: |  |
|  |
| **Principal Investigator (PI):** |  | **Title:** |  |
| **PI Email:** |  | **Phone:** |  |
| **PI Meets Eligibility Requirements:** | [ ]  Yes [ ]  No | **Employed by:** | [ ]  D-H [ ]  Dartmouth College |
|  |
|  **PI Department:** |  | **Dept Chair:** |  |
| **PI Section:** |  | **Sect Chief:** |  |
|  |
| **Sub-Investigator Name & Title:** |  |
|  |  |
| **Sub-Investigator Name & Title:** |  |
| [ ]  Sub-Investigator(s) is **not** named in another Letter of Intent being submitted this cycle |

**PRINCIPAL INVESTIGATOR’S SIGNATURE**

I understand that the Review Committee will review this Letter of Intent and, if approved, I will be invited to submit a full proposal.

Submission of this Letter of Intent does not obligate me to submit a full application. However, if I become aware of any reason for which I will be unable to submit a full application or carry through on the proposed project, I will inform The Hitchcock Foundation immediately.

Applicant (PI) Signature Date

**Letter of Intent**

**Summary Statement**:

**Scientific Summary**:

**Closing**:

**Attachments**:

References

Biosketches in the NIH format (not to exceed five pages each)