



Innovator Awards for Postinfectious & Posthemorrhagic
Hydrocephalus
Research Letter of Intent: Due February 23, 2017 at 5:00 pm ET

Contact Information

Sponsoring Institution (list sponsoring institution)*

Does the sponsoring institution accept research contracts that do not provide indirect costs?

Yes Accepts

Principal Investigator (Name)*

Degree(s)*

Title/Position*

Department

Street Address*

City

State/Province/Territory

Zip/Postal Code

Country*

Phone Number

E-Mail Address*

Proposal

Project Name*

Which Award Level do you anticipate submitting an application for?*

\$25,000

\$50,000

Which Focus Area are you submitting an application for?*

Postinfectious Hydrocephalus

Posthemorrhagic Hydrocephalus

Study Proposal (3000 characters max): Describe the rationale, study design, and expected outcomes*

Impact Statement (650 characters max): Describe the potential for this research to impact postinfectious or posthemorrhagic hydrocephalus*

Potential Reviewers

Please provide the names and contact information for three investigators qualified to review your proposal.

Reviewer 1 (name, institution, e-mail)*

Reviewer 2 (name, institution, e-mail)*

Reviewer 3 (name, institution, e-mail)*

Press Submit (this will create a DRAFT in your e-mail account that will need to be sent)

or

Save and E-mail Completed forms to research-loi@hydroassoc.org

Mac users: Save or Print and E-Mail Completed forms to research-loi@hydroassoc.org

You will receive an e-mail confirming your submission has been received.

Deadline: 5:00 pm ET on February 23, 2017

Questions? Contact Jenna Koschnitzky (research@hydroassoc.org) or 240.483.4540