

THE HITCHCOCK FOUNDATION
LETTER OF INTENT COVER SHEET

*This completed and signed form must be received by
Jennifer.K.Reining@Hitchcock.ORG and Karen.E.Jones@Hitchcock.org
no later than 12:00 pm on the due date.
(12:00:01 will be considered late)*

<u>Principal Investigator name & title:</u>	<u>Department:</u>
<u>DH/DC ADDRESS:</u>	<u>Department Chair:</u>
<u>Approximate budget:</u>	<u>Other funding sources applied to:</u>
<u>Co-Investigator's name & title:</u>	<u>Proposal Title:</u>

<u>Brief description of the Specific Aims of the project:</u>
--

Please attach CV or Biosketch for investigator - not exceeding 3 pages each.

ADDITIONAL INFORMATION (this section must be completed):

The project is research that will use human subjects. ___ *yes* ___ *no*

If yes, the project most likely is subject to the federal regulatory requirements under the Common Rule. If you have answered yes, please indicate whether the project will be exempt from review, will qualify for expedited review or will require full review by the IRB.

The project will use or disclose Protected Health Information. ___ *yes* ___ *no*

If yes, explain how the project will meet the HIPAA requirements under D-H's policy and protocol on keeping PHI confidential.

I understand that the Scientific 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.

Signed:

Date: