**JDRF Canada – Brain Canada**

**Addressing Mental Health in Type 1 Diabetes Team Grants**

**Registration Form**

|  |
| --- |
| **Registration Information** |
| **Principal Applicant Name**: | **Institution**: |
| **Email Address:** | **Position** (Title): |
| **Title of the Proposal:** **Keywords for the proposed research project (up to 10):** |

**REVIEW PROCESS**

JDRF Canada and Brain Canada will perform a relevance review to identify applications that are eligible and in alignment with the objectives of this funding opportunity. All eligible and relevant projects will be invited to submit a Full Application. Applications that are not deemed to be relevant by both funding providers will be withdrawn from the competition. Registration is essential in order to submit a Full Application.

**PROJECT INFORMATION**

Please send the completed Registration Form, along with the required attachment, as a PDF to grants@jdrf.ca. The PDF and accompanying attachment will need to be formatted using 12-point Time New Roman or 10-point Arial font, single-spaced, on a letter-size page with 1" minimum margins. The font size for figures and legends must be a minimum of 10 points. Use of a condensed font and spacing is not permitted. Registration forms received in any other format, exceeding the word limits, incomplete, or late, will be rejected. **It is the sole responsibility of the Principal Applicant to ensure their submission adheres to these requirements and that it is received by 17:00 ET on September 15th, 2021.**

**Proposed Research Project Summary**

Provide a summary description (maximum 1-page) of the proposed research project focused on mental health and type 1 diabetes. In addition to defining whether the proposed project is a new project or an expansion of an existing project, this summary should include a brief description on the project’s:

* Objectives and aims, including:
	+ the intervention to be investigated;
	+ the specific mental health disorder(s) addressed; and
	+ the subpopulation(s) with type 1 diabetes who will benefit from this work.
* Methodology;
* Plans to engage people with lived experience (PWLE)\* of diabetes;

\* PWLE may include one or more of the following:

* A PWLE of type 1 diabetes, which can include an individual living with type 1 diabetes or an informal caregiver (e.g., parent, guardian, spouse, sibling, etc.). All PWLE involved as collaborators must be aged 18 or over.
* A patient group that represents PWLE of type 1 diabetes.

**Team Member Details**

*Please list the name, affiliations, and roles of all team members in the table below. Team members include, but are not limited to, Principal Applicant, co-investigator, technician, research assistant, research associate, postdoctoral fellow, student, faculty collaborator, and patient collaborator. Please include details of additional team members in an attachment if necessary.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Position (Title)** | **Affiliation** | **Role** (maximum 50 words) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Attachments**

* Summary description of the proposed research project, as described above.

**OPTIONAL INFORMATION**

* Provide names and contact information for up to three individuals (Canadian and/ or international) who are knowledgeable in your research topic and would be able to evaluate a Full Application. Individuals should not have a conflict of interest.

*[Click or tap here to enter text.]*

* List individuals to whom the full application should not be sent for review.

*[Click or tap here to enter text.]*

**I acknowledge that, if I am awarded funding through this opportunity, that:**

[ ]  No more than 10% of funds may be spent outside of Canada;

[ ]  Funds awarded may not be used to cover salaries or consulting fees of any investigator or researcher

 holding an academicappointment;

[ ]  Funds awarded may not be used to cover indirect or overhead costs associated with managing the

research project.

**I certify that:**

[ ]  All members of the team have agreed to their inclusion in this application and allow me to represent

them throughout the application process.

**PRINCIPAL APPLICANT SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_