LOI FORM Instructions & Questions

The LOI form can be accessed online from April 15th - June 15th and from September 1st to November 1st. The deadlines to submit the LOI form are June 15th and November 1st.

Grant request amount not to exceed $150,000.

You will find the following questions below on the LOI Form which must be completed online by clicking on the LOI Form link on the MNITF website. (Note: The actual LOI form is periodically revised and this guide may not have been updated.) You are required to answer the questions with an asterisk (*) in order to submit an LOI. The Principal Investigator must create a User Account and submit form.

Eligibility Criteria*
Please confirm that you've read and understand the eligibility criteria.
Please review the MNITF Research Grant Program here. You must be eligible to be considered.

- Principal Investigator is actively involved in research.
- Organization is established (refer to possible limitations on website).
- Research falls within the priority areas listed above.
- Research is aimed to improve clinical outcomes and/or positively impact the field of organ transplantation.
- Organization is willing to accept indirect costs not to exceed 10% of direct costs.
- Research funding is not readily available from other sources.
- If a Patient Education Improvement Project, must meet additional criteria.

Do you meet the eligibility criteria? Choices Yes No

Description of Organization and Principal Investigator

Project Name* Character Limit: 100

Organization Overview*
Please provide a brief description of your organization. Character Limit: 1000

Is the Organization a 501c3 as Designated by the IRS?*
Please note: The MNITF considers requests from organizations with and without 501c3 status.

Choices Yes No
Organization Support *(Character Limit: 600)*
Briefly explain how your organization is supporting this project. (Note: Patient Education Improvement Projects must have support from the organization)

Stage of Investigator*
An Early Stage Investigator:
- has completed terminal research degree or end of post-graduate clinical training, which ever date is later, within the past ten years; and
- has not previously competed successfully as a Principal Investigator for a substantial NIH independent research award.

Are you considered an Early Stage Investigator?

**Choices**  
Yes  No

Bio of Principal Investigator* *(Character Limit: 2000)*
Please provide a brief bio, include accomplishments in this area of research.

Project Overview

Project Objective* *(Character Limit: 600)*
Summarize the overall objective of this project in one to three sentences.

Amount Requested* *(Character Limit: 20)*
Note: Grant amount requested must not exceed $150,000 and Patient Education Improvement Projects are not to exceed $100,000.

Total Budget (from LOI form)* *(Character Limit: 20)*
What is the total amount of funds required from all sources to undertake this project?

Project Start Date*(Character Limit: 10)*
MNITF does not award grants to retroactively fund projects completed prior to the granting decision which will be toward the mid-October 2021. Project start date should November 1, 2021 or after.

Project Duration*(Character Limit: 2)*
What is the anticipated total duration of this project in number of months? (Not to exceed 24 months)
Please Indicate the Priority Area of the Project*

**Choices**
- Donor Selection & Screening
- Organ Quality Assessment
- Organ Recipient Related and/or Post-Transplant Monitoring
- Patient Education Improvement
- Other

"Other" Priority Area *(Character Limit: 100)*
If selected "Other" from the above question, what is the priority area?

Impact of Project on the Transplant Community* *(Character Limit: 2,500)*
Briefly describe the potential impact of the project on the transplant community.

Description of Project* *(Character Limit: 6,250)*
Provide a brief description of the project, include:
- Goals/Aims
- Anticipated Outcomes
- How Goals will be Measured

Additional Comments *(Character Limit: 1,000)*
In one paragraph, provide additional comments you believe would help the RAB understand why your project should move forward.

Principal Investigator

Print Name of Principal Investigator* *(Character Limit: 250)*

Title of Principal Investigator* *(Character Limit: 100)*

Today's Date* *(Character Limit: 10)*