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| --- | --- |
| DATE: | MM/DD/YYYY |
| INVESTIGATOR(S): | XXX XXXX, MD, Principal Investigator, InstitutionXXX XXXX, PhD, Co-Investigator, Institution |
| RE: | Perinatal Origins Of Disease Healthy Start Pilot Grant Application Cycle 2020 – Letter of Intent |
| IRB# | *(if applicable)*  |
| IACUC# | *(if applicable)* |

Dear Perinatal Origins of Disease Leadership,

This letter declares PRIMARY INVESTIGATOR at COLLABORATING INSTITUTION intends to submit a proposal for the Perinatal Origins of Disease *Healthy Start Pilot Grant*.

**Project Title:** NAME OF PROJECT

Dr. NAME, TITLE AND DEPARTMENT is the Principal Investigator, and NAME(S), INSTITUTION will also be collaborating on this study. A biographical sketch for each investigator is attached.

**Background & Research Plan**

We hypothesize that… Our studyaims to… We will do so by [METHODS OVERVIEW]. The facilities we will be utilizing for this work are [LAB AVAILABLE OR HOSPITAL LOCATION(S)]. This study is expected to contribute significant research to the field of Perinatal Origins of Disease because… [JUSTIFY INNOVATION AND RELATION TO POD].

**Budget & Resources Summary**

The budget for this project is [$$$$]. [$$$] will go to support personnel including, a lab technician, CRA… etc. [$$$] will be allocated to laboratory supplies, [$$$] to participant reimbursement, and [$$$] to sample processing. We would also like to request the use of 0.2 FTE of a Clinical Research Coordinator to assist with … [other options: # of placenta and cord blood samples with X diagnosis].

**Grant Proposals & Awards**

The following are grant proposals and awards submitted that would support this project in addition to the requested funds: *or “*This project is not currently funded by any other awards and no award applications are pending.”

GRANT FUND TITLE, AMOUNT REQUESTED/AWARDED, STATUS (PENDING, REVIEWED, RESUBMISSION, ETC.)

**Attachments:** Investigators’ and Co-Is’ Biographical Sketch