



# 2025 Brain Tumour Research Feature Grant Application

braintumour  
foundation  
OF CANADA

## Section 1: Principal Investigator Information

### 1. Principal Investigator:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Designations: \_\_\_\_\_

### 2. Present Position:

Title: \_\_\_\_\_

Department: \_\_\_\_\_

Institution: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### 3. Institution(s) where research will be conducted (complete only if different from above):

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### 4. Outline your role as applicant for this project: \_\_\_\_\_

---

---

---

### 5. List all collaborators and their contribution in project:

---

---

---

---

6. Please attach a mini Curriculum Vitae for the principal applicant for the last five (5) years only. Maximum – two (2) pages.

## Section 2: Project Information

7. Title of Proposed Research: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate the type of research you will be conducting. Please refer to page 1 of the “2025 Outline & Guidelines” for definitions.

- Basic Research  
 Clinical Research  
 Translational Research  
 Population Study

Use of Human Subjects:  Yes  No

Use of Research Animals:  Yes  No

If yes anywhere above, please specify: \_\_\_\_\_

**Please note:** Where research involving human and/or animal subjects is indicated, applications will be reviewed as to the scientific validity of the project. Confirmation of approval of ethics, is required if successful, within 60 days of receiving notification of receiving award. If you have already, please attach (proof of submission for approval, or the actual approval) with your application.

Please be brief and follow the instructions for the following sections.

8. In the space provided below, please provide a brief summary of your project that can be used for publications of Brain Tumour Foundation of Canada. Please describe the implications of this research project for brain tumour patients. Maximum – 200 words.

9. Please provide an outline of the research on not more than three (3) attached pages using **TIMES ROMAN 12 POINT FONT**. The outline will be rated on the following six points:

- a. Purpose of the research
- b. Background information
- c. Formulation of the objective of hypothesis
- d. Research design
- e. Expectations
- f. Possible pitfalls
- g. References if appropriate (2 page max)

**IMPORTANT:** As much as possible, the outline of the research should be written in lay terms. The members of the Research Committee of Brain Tumour Foundation of Canada, who will be reviewing the grant applications, are from many different backgrounds: medicine, industry, business, philanthropy, Psychology etc. If you feel it is necessary to use complex terminology, please try to explain the terms as much as possible. The Research Committee may also seek the help of outside reviewers.



All funds are paid to the order of the institution and mailed to the institution's business/finance office directly. In the event that you are awarded funds for your project, the following information is needed to help us process the award in a timely manner.

Name of contact at the **Institution's Business/Finance or Accounting Office:**

Contact's Title:

Contact's mailing address:

Contact's Phone Number & Email address:

Also, please provide the **contact information for media inquiries** for your institution:

Contact's Title:

Contact's Phone Number & Email address:

## Section 4 – Signature and Submission Confirmation

All applications must include the following:

- Completed application form (submit as ONE PDF lastname\_firstname\_Grant\_applied\_year)
- Mini Curriculum Vitae for the Applicant for the last five (5) years only. Maximum – two (2) pages
- Research Project Summary in Lay Terms
- Research Project Full Description
- Proof of submission to ethics board, or ethics approval, where applicable (must be provided within 60 days of receiving award, prior to fund dissemination)

---

***Applications that are incomplete or do not conform to the guidelines will not be reviewed.  
This includes signature of applicant which affirms all statements made in the application are true.***

---

---

Signature of Principal Applicant

---

Date

---

Name of Principal Applicant (print or type)

*2025 Brain Tumour Research Feature Grant Application: Brain Tumour Foundation of Canada*

## **DEADLINE FOR APPLICATIONS**

Grant applications must be postmarked by **May 16, 2025**. The selection process and approval will take place shortly after and the results will be communicated to all applicants by **August 2025**.

Please **email your application as ONE PDF** directly to Susan Ruypers: [sruypers@braintumour.ca](mailto:sruypers@braintumour.ca)

**Brain Tumour Foundation of Canada**

**Attn: Research Committee**

**205 Horton Street E., Suite 203**

**London, ON N6B 1K7**

**Re: 2025 Research Feature Grant Application**