

Alzheimer's Association Health Services Research in Alzheimer's disease and Related Disorders (HSR-ADRD) Program

Through the Alzheimer's Association William and Sheila Konar Health Services Research Initiative, the Alzheimer's Association announces this second offering of the Health Services Research in Alzheimer's disease and Related Disorders (HSR-ADRD) Funding Program. For purposes of this program, Health Services Research (HSR) studies are defined as how health care is delivered, accessed, financed, and experienced, and identifies evidence-based strategies to improve care systems, outcomes, and equity. The HSR-ADRD program is aimed at advancing health services research that ensures high-quality, equitable, and person-centered brain health and dementia care along the healthcare continuum, across communities and healthcare settings.

Background:

The detection and diagnosis of cognitive impairment, including mild cognitive impairment (MCI) and dementia, including all-cause and Alzheimer's disease, are critical components of effective care and treatment. However, substantial variation exists in timeliness, accuracy, and quality of dementia detection and diagnosis across populations, care settings, and health systems. Importantly, a timely and accurate diagnosis alone is insufficient to improve outcomes without coordinated, person-centered care following diagnosis. Many individuals living with cognitive impairment or dementia and their care partners encounter fragmented care pathways, limited care planning, and poor coordination across providers and settings. At the individual level, cultural differences in the perception of dementia symptoms may delay care-seeking behaviors, while language barriers or mistrust in the healthcare system may further limit access to diagnostic services. At the community and health system levels, unequal access to advanced diagnostic technologies, insufficient provider training on culturally competent care and use of newly available biomarker-based diagnostic tools, and biases within healthcare delivery systems compound the challenges. The absence of structured, person-centered, and culturally responsive care plans can leave individuals and families unprepared to navigate treatment decisions, symptom management, and long-term care needs. These challenges may be particularly pronounced in settings with limited resources or among populations facing social and structural barriers, reducing the potential benefits of early detection and diagnosis.

Despite recent innovations in diagnostic tools and care models, important gaps remain in understanding how diagnostic processes connect to downstream care coordination, care planning, and service delivery across diverse populations and settings.

The HSR-ADRD program seeks to support research that strengthens dementia detection, diagnosis, and post-diagnostic care pathways along the care continuum. Projects may address a range of health services research questions, including, but not limited to, studies examining barriers and solutions to timely access, quality, and care coordination. By supporting rigorous and innovative research, this program aims to generate actionable evidence to improve person-centered, coordinated, and equitable brain health and dementia care.

Program Objectives:

This program seeks proposals that utilize rigorous methodologies to advance understanding and improvement detection, diagnosis, and post-diagnostic care for Mild Cognitive Impairment (MCI) and Alzheimer's disease and related dementias (AD/ADRD).

This award is structured as an individual research grant, with funding administered through the recipient's institution. Proposals should address one or more Areas of Focus. Areas of Focus represent high-priority research topics for which this program is actively seeking proposals and include:

- **The Value of Early Detection and Diagnosis:** Studies should investigate outcomes

associated with early detection and diagnosis on at least two levels of the dementia care ecosystem (i.e., individual/families, providers/clinicians, health systems/payers, and policy/society).

- **Care Pathways for Individuals with MCI or Dementia:** Studies should consider comorbidities and investigate how people are being screened and diagnosed in different settings, and the post-diagnosis pathways for care and treatment, including pharmacological and non-pharmacological interventions or combinations thereof.

Innovative approaches that develop or refine methodologies to improve detection, diagnosis, care coordination and/or person-centered care are highly encouraged. Studies may examine disparities and inequities as a key focus or as an important dimension of broader research questions, particularly for underrepresented and underserved populations. Studies that incorporate the voices of individuals and communities impacted by cognitive impairment, including MCI and dementia, apply intersectional frameworks, and/or demonstrate potential for scalable and sustainable solutions are particularly well-aligned with this program's objectives.

Studies may employ quantitative, qualitative, or mixed-methods approaches and must align with the program's focus on generating actionable findings to inform practice and policy changes that lead to advancing equity and improving outcomes in brain health and dementia care.

Eligible study designs are listed below (in no particular priority order) and include, but are not limited to:

- **Observational studies** that examine issues and solutions in mild cognitive and dementia detection and diagnosis, care planning and coordination, or post-diagnostic care pathways across populations, settings, or health systems, including studies that analyze gaps in care and disparities in access, quality, outcomes, and costs.
- **Cross-sectional studies** that examine specific populations, settings, and policies at a single point in time to identify gaps and variation in diagnostic and care practices, access to services, care transitions, costs, and outcomes.
- **Cohort studies** that track populations over time to evaluate, for example, access to diagnostic tools, care pathways, health care utilization and costs, and health outcomes.
- **Pragmatic randomized controlled trials (pRCTs)** that test models and interventions to improve MCI and dementia detection and diagnosis, care planning and coordination, costs, and outcomes in real-world settings.
- **Implementation science studies** that explore the uptake, adaptation, and sustainability of evidence-based practices for MCI and dementia detection, diagnosis, and care, including those aimed at promoting equitable access and outcomes.
- **Longitudinal studies** that assess the long-term impact of MCI and dementia detection and diagnosis, care pathways and models, and/or system and policy-level changes.
- **Health economics studies** that evaluate, among other things, cost-effectiveness and sustainability of incorporating new diagnostic tools, care models, and/or innovative approaches into existing workflows and care practices.
- **Technology integration studies** that examine the use of digital tools, artificial intelligence, or telehealth to improve access to detection, diagnosis, care, adherence to treatment, costs, and outcomes.
- **Evaluation studies** that examine the implementation and effectiveness of strategies, interventions, and policies designed to improve access, quality, coordination, or equity in MCI and dementia detection, diagnosis, and care.

Data sources may include:

- **Primary data** such as surveys, interviews, and focus groups designed to capture firsthand insights from diverse populations.
- **Secondary data** from large datasets, registries, electronic health records (EHR), and claims data, providing a robust foundation for analyzing disparities and evaluating interventions

Funding and award period:

Each HSR-ADRD award is limited to a total of \$250,000 U.S. (direct and indirect costs) for a duration of up to two years (awards should be a minimum one year). Indirect costs are capped at 10 percent of total direct costs and are inclusive of indirect costs for the implementing institution as well as for any subcontracts. Detailed guidelines on allowable and not allowable costs are included below.

Note to Canadian applicants: The Alzheimer's Association and Brain Canada Foundation are pleased to consider partnership for successful Canadian-led applications.

The Alzheimer's Association reserves the right to not allow unbudgeted expenses. Key Dates: LOI and application submissions must be received by 5:00 pm Eastern time by their respective deadlines. Late submissions will not be accepted - *no exceptions*.

Letter of Intent Launch	By March 20, 2026
Letter of Intent Deadline*	May 6, 2026, at 5:00 pm ET
Application Deadline	July 22, 2026, at 5:00 pm ET
Application Review	August – October, 2026
Award Notifications	By November 30, 2026

*** Note, due to the high number of submissions, specific feedback and reviewer comments are not provided at the LOI stage.**

Eligibility and Ineligibility Considerations:

To avoid disqualification, investigators are encouraged to carefully consider these eligibility and ineligibility requirements before applying. The Alzheimer's Association reserves the right to find an investigator ineligible to submit for a particular program, based on the guidelines below. This section describes general inclusion and exclusion criteria. Specific requirements and additional exclusions to eligibility are noted in some detailed competition descriptions.

- Eligibility (Applicant):
 - **The Alzheimer's Association recognizes the need to increase the number of scientists from underrepresented groups to strengthen the research enterprise for Alzheimer's and related dementia. Scientists from these groups are encouraged to apply.**
 - Applicants must be considered full-time employees based on the organization/institution definition of full-time.
 - Applicants can be any career level, including postdoctoral fellow, but must hold a full-time position at the time of the grant application submission at an academic institution, or Veterans Administration hospital in the U.S.
 - The Alzheimer's Association reserves the right to request further documentation to confirm eligibility of an applicant.
 - Adjustments to this eligibility period may be considered for documented career interruptions such as family leave, military service, or major illness or injury. The approval of any exemptions must be obtained prior to submitting a Letter of Intent

- (LOI).
- Only one primary PI per application. Multiple PI projects are not allowed. However, collaborators may be included as key personnel on the project.
- Eligibility (Organization/ Institution):
 - In general, public, private, research laboratories, medical centers, hospitals and universities are eligible to apply. State and federal government-appropriated laboratories in the U.S. and abroad, and for-profit organizations are prohibited from serving as the applicant institutions for this program. However, state and federal government scientists can participate as collaborating scientists with research teams from other eligible applicant institutions.
 - For the Letter of Intent (LOI), you will be required to upload proof of your organization's not-for-profit status. An IRS Letter of Determination is no longer accepted and you must submit either of the following:
 - a W-9 that is signed and dated within the past five years by the signing official for US entities
 - a W-8 or W-8-BEN that is signed and dated within the past five years by the signing official
 - The form must include the EIN, TIN or VAT number
 - For non-profit organizations (non-academic), additional documentation may be required to confirm your organization has segregation of duties between transaction execution and transaction recording.
- Ineligibility (Applicant):
 - Individuals currently enrolled as a student in an undergraduate, master or doctoral program are not eligible, regardless of prior degree status.
 - Temporary, part time, or acting faculty are not eligible.
 - Investigators who are delinquent in reporting to the Alzheimer's Association. The Alzheimer's Association will not accept new grant applications from investigators currently awarded an Association grant who are delinquent in submitting required reports and other deliverables on active grants. Investigators that have previous Alzheimer's Association awards closed as 'Incomplete' are not eligible to apply without exception. This policy will be strictly adhered to with no exceptions.
 - Overlapping funding of more than one Alzheimer's Association grant is not allowed. Investigators with Association awards in programs from specific program announcements may still apply to a program listed in this call, but the project must be distinct from their current award. Overlap with research or clinical fellowship programs or this program are not allowed.
 - Applications that represent the same aspects of a project should not be submitted to different programs of the Alzheimer's Association. There are some exceptions so please contact grantsapp@alz.org if you have questions.
 - Current Medical and Scientific Advisory Group (MSAG) and International Research Grant Programs (IRGP) Council members of the Alzheimer's Association cannot serve as principal investigators in any award. They may serve as key personnel or collaborators, provided there is no financial benefit and/or salary allocated to them.
- Ineligibility (Organization/ Institution):
 - State and federal government-appropriated laboratories in the U.S. and abroad and for-profit organizations are prohibited from serving as the applicant institutions for this program.
 - Applications will not be accepted if the institutional official responsible for fiscal oversight of the award also serves as the Principal Investigator (PI) on the project. Additionally, no familial relationship may exist between the PI and the institutional official with fiscal authority.

- Applicants CANNOT submit more than one proposal to any of the programs in the current grant competition—even if the proposals cover distinctly different topics (i.e. only one application is allowed regardless of the distinct areas of focus). *It is allowed for members of the same team to submit different aspects of a project to different programs, as long as they are complementary and not the same project.*
- Applicants may revise and resubmit an application that was previously submitted for an earlier grant cycle; however, a new LOI is required each year. A current LOI corresponding to the application year must accompany each application. Revisions of previous submissions will be treated as new applications. Efforts will be made to provide some continuity in reviews. The resubmission of an approved LOI does not guarantee that you will be invited to resubmit a full application in a future cycle. Resubmissions may be submitted to a different program in this call and still be a resubmission. Resubmissions are reviewed holistically again, and merely responding to reviewer critiques is not enough to be funded on resubmission.

Note: Alzheimer's Association grants are generally open to scientists and researchers across the globe; however, as a U.S.-based charity, the Alzheimer's Association is subject to, and complies with, U.S. law. As a result, the Alzheimer's Association cannot award, and will not award, grants in violation of applicable U.S. statutes and regulations. This means, among other things, that the Alzheimer's Association cannot, and will not, fund any individual or entity (i) that is subject to U.S. comprehensive or targeted sanctions or if awarding funding would result in a violation of such sanctions, (ii) that is on the U.S. List of Specially Designated Nationals or entities owned or controlled by such persons, or (iii) when doing so is otherwise prohibited by U.S. laws related to combating terrorism.

Letters of Intent- Additional Details:

LOIs are a required component of the application process. No application will be considered without an approved LOI, including resubmitted applications. Additional details about the LOI components, review criteria and process are included below.

To ensure a fair and unbiased review process, the Letter of Intent (LOI) will undergo blinded review. Applicants must not include any personally identifiable information (e.g., names, institutions, locations, or other identifiers) within the body of the LOI. Any submission containing such information may be disqualified or returned for revision. Please adhere strictly to this guideline to maintain the integrity of the review process.

LOI Components: Applicants must complete the required sections and upload any required documents. Some of these required fields are described below:

- **Principal Investigator** -- Name & contact information
- **Lead Institution**
 - Applicant must be a full-time employee at time of submission
 - Institution/organization name must be in English
- **Current academic rank/position**
 - Must be current at the time of submission; *pending promotions are not allowed*
- **Proposal title**
- **Area of focus** -- Specific options will be available from a dropdown menu
- **Brief project description**
 - Brief project summary, including methodology
 - Specific aims of the proposed project
 - Relevance and novelty of the proposed project - studies must be within the scope of health services research and focus on detection, diagnosis, care, costs, and/or outcomes of MCI and dementia
 - Implication of potential findings for practice and policy change/transformation

NOTE: EACH SECTION IS LIMITED TO 1,000 CHARACTERS, INCLUDING SPACES

- **Employer Identification Number (EIN) or TIN**

- This number must match the non-profit documentation

NOTE: THIS IS INFORMATION SPECIFIC TO THE INSTITUTION NOT THE APPLICANT.

- **ORCID ID**

- **Non-profit verification**

- W-9 (US entities) signed and dated within the past five years by an authorized institutional signing official and must include the EIN number
- W-8-BEN (non-US entities) signed and dated within the past five years by an authorized institutional signing official and must include the EIN/TIN or VAT number

NOTE: THIS DOCUMENT SHOULD NOT CONTAIN THE APPLICANT'S INFORMATION.

- **Biosketch**

- For Principal Investigator only, applicants will be able to provide biosketches for other members of the project team at the full application stage
- The Alzheimer's Association highly recommends using the latest NIH biosketch format (excluding Section D. Scholastic Performance), but any format will be accepted. Hyperlinks are allowed in biosketch only for individual research projects.

- **LOI Review Criteria and Process:**

- LOIs will be evaluated in a **blinded review**, where the reviewer has no information about the applicant and their environment for conducting the research. Each LOI is evaluated with attention to:
 - Demonstrable innovation/novelty of the proposed project
 - Impact of project on Alzheimer's and all other dementia research
 - Evidence of methodological rigor that addresses the research question(s) being proposed
- LOIs will be reviewed by 2 or 3 reviewers with expertise in the area of the application. Due to the number of LOIs received, individual feedback or comments from reviewers will not be shared.
- A fraction of LOIs will be invited for full application.

Applications - Additional Details:

Following the LOI review, some of these projects are invited to submit full applications. The PI who submits the application must be the same PI who submitted the approved LOI. The application does not need to be completed in one session; a partially completed application can be saved and completed at any time before the deadline. It is imperative that you proofread your application before submission; you will not be allowed to make any changes to the application after the deadline or once applications are under review.

The application must be submitted by the receipt date/time deadline. Once submitted, you will receive a confirmation e-mail from proposalCENTRAL that your application was successfully submitted. If you do not receive a confirmation, click the Proposals tab and under the "Status" column make sure it says **Submitted** and not **In Progress** which indicates you have not yet submitted your application. It is the applicant's responsibility to make sure that the application is complete and accurate before submission. Only a single copy of an application will be accepted.

Signatures are not required at the time of submission by the Association, however, the signature page provided is for use should your institution/organization require signatures; the Association does not override any institutional policies and/or procedures. Please do not submit the signature page with your application.

Applicants may use LLMs and other generative AI tools in the preparation of their LOIs and full

applications. Applicants are fully responsible for the content of their proposal, even those parts produced by an AI tool. Using one of these tools will not affect the review of your application.

Additional details for the application process are described below:

- Application Components:
 - If you are invited to submit a full application, the required materials including the application format, templates, and instructions, will be available online at proposalCENTRAL after your LOI has been approved in the system.
 - Full applications will not be accepted without an approved LOI from the current cycle
 - If you did not receive an email from an Alzheimer's Association staff member about your approval to submit a full application for the current cycle you should not submit an application, even if one is available in your proposalCENTRAL Account.
 - Applicants must complete the required sections and upload required documents as listed. Some fields are identical to the LOI.
 - It is up to the investigator whether they wish to declare their application a resubmission. Even if you are submitting a similar application to a prior submission you do not need to declare it a resubmission. Resubmissions are granted a one-page summary addressing comments raised by reviewers in a prior review cycle(s).
- Budget Considerations:
 - A budget justification for the proposed research project is required and must be submitted with the application and within the allowable two-page limit. However, if the application is awarded a more detailed budget will be required and must be approved before the disbursement of funds.
 - Principal Investigator, Co-Principal Investigator, and Key Personnel & Effort: All % Efforts listed on the application should reflect total RESEARCH EFFORT rather than effort as a percentage of salary or % effort to this specific project. It is not required that Co-PI's and Key Personnel accept salary from an award but should have some effort listed.
 - **It is required that most of the funds awarded under this program be used for direct research support. No more than 10% of the total direct costs may be included as indirect costs; this is inclusive of indirect costs for the implementing institution as well as any subcontracts.**
 - **Direct Costs Allowed:**
 - Purchases over \$10,000 require prior approval, even if included in the project proposal budget
 - Computer software if used strictly for data collection (requires prior approval)
 - Salary for the principal investigator, scientific (including postdoctoral fellows) and technical staff (including laboratory technicians and administrative support directly related to the funded grant); there is no salary cap
 - Membership to scientific association
 - Professional development / communication training
 - Support for travel to scientific and professional meetings and additional support for travel expenses necessary to carry out research planned – this may include site visits. A total of \$12,500 over a three-year period may be requested for travel purposes and is not to exceed \$7,000 in any given year. If you request the full \$12,500 towards just two years of travel and are requesting a three-year award you will not be able to request travel funds for one of those years.
 - Training costs to visit and perform research related to the awarded project on another community setting (this is not to be included in the travel costs)

- Travel expenses for projects involving human volunteers are allowable expenses not included in the travel above. This can be captured under other expenses (itemized) in the budget.
- **Direct Costs not allowed:**
 - Computer hardware or standard software (e.g. Microsoft Office, mouse monitor, computer parts, AppleCare)
 - Laboratory supplies and equipment, including freezers, ultracentrifuges, RT-PCR machine, microscopy/imaging equipment
 - Costs associated with animal models
 - Service contract fees of equipment
 - Construction or renovation costs
 - Tuition
 - Rent for laboratory/office space
 - Visa costs and fees
 - Expenses such as Data Network Recharges and Computing and communication device support services. However, data sharing and/or data storage for imaging, sequencing and other study data is allowed.
 - General liability insurances, such as GAEL
 - Wire and currency exchange fees; it is important to note that the Association does not adjust total funded amount in relation to fluctuations in exchange rates. All grants are paid in U.S. dollars.
 - Institutional overheads associated with staff time
 - The Alzheimer's Association Medical and Scientific Advisory Group (MSAG), the International Research Grant Program (IRGP) Council members and current employees of the Alzheimer's Association are allowed to be key personnel or collaborators on projects, however they are NOT ALLOWED to receive any salary or compensation. A complete list of MSAG and IRGP Council members can be found on our website alz.org/grants.
 - *The Alzheimer's Association reserves the right to decline any charge that is an institutional fee and/or service charge.*
- Application Review Criteria and Process:
 - All applications are subject to a multiple stage peer-review process carried out with an online system. This multi-stage process is central to the Alzheimer's Association's award decisions and is designed to ensure both scientific rigor and fairness in the review of all submitted applications.
 - In the first stage, applications are reviewed and rated by peer scientists with expertise in the proposed area of research. Applicants may include recommended reviewers and have the option to exclude specific reviewers from evaluating their application if a conflict of interest exists. Conflicts of interest include (but are not limited to):
 - The Applicant trained with/ by the reviewer.
 - The reviewer published with the Applicant in the last four (4) years. This excludes workshop or large consortia (i.e. ADNI, IGAP, etc.)
 - The reviewer has been a co-investigator on a grant application or award with the Applicant in the last four (4) years.
 - The reviewer has a conceptual difference of opinion with the Applicant that will prevent a fair review.
 - The reviewer will receive financial benefit from the Applicant receiving an award.
 - In stage one of review, each application will be evaluated with the following criteria:

- **Significance:** projects must clearly demonstrate the need and relevance of the study to advance understanding and improvement of MCI and AD/ADRD detection, diagnosis, and post-diagnostic care.
 - **Quality of the work plan:** proposals must indicate a strong research methodology with high feasibility.
 - **Quality and adequate use** of available resources and budget
 - **Real-world impact:** projects must explicitly demonstrate how the study will generate actionable findings to inform practice and policy changes in brain health and dementia care.
 - Impact-risk of the proposal and how it will add to the overall knowledge and advancement of health services research.
 - Resubmissions will have the opportunity to provide a response to prior reviews. Impact-risk of the proposal and how it will add to the overall knowledge and advancement of health services research.
 - Resubmissions will have the opportunity to provide a response to prior reviews.
- The second stage includes further review and discussion of the scores and comments resulting from the initial review process to normalize across reviews and programs. The second review is carried out by the International Research Grant Program (IRGP) Council members and invited review committee members to ensure fairness and balance in the initial review procedures and to make funding recommendations to the Association.
 - Final recommendations from the IRGP Council are shared with the Medical and Scientific Advisory Group (MSAG) and with the Alzheimer's Association for final approval. Members of the IRGP Council and MSAG are internationally recognized experts with distinguished careers in Alzheimer's and related dementia.

Financial Responsibility:

Funding is awarded to the institution and/or organization, not to the individual principal investigator. The principal investigator or a first-degree relative cannot be listed as the signing official or financial officer, or have checks sent to their attention if awarded.

Appeals of Scientific Peer Review:

To maintain a fair and rigorous review system, the Alzheimer's Association has a process for appeal of funding decisions. Appeals will not be considered for the letter of intent stage.

Regarding applications, an appeal is intended to address extraordinary circumstances.

Appropriate reasons for initiating an appeal might include:

- Evidence that a reviewer has an undeclared conflict of interest.
- An egregious error or misunderstanding in the review process.
- Active malfeasance or demonstrable lack of due diligence.

The appeal process is not intended to provide a mechanism for routine protest of failure to receive a grant. It is anticipated that funding through the Alzheimer's Associations grant programs will be extremely competitive and is limited by availability of funds.

If an applicant believes an extraordinary circumstance has contributed to failure to receive funding, the principal investigator may send a two-page, double-spaced formal letter of appeal (Word document) to grantsappeals@alz.org. Any supporting documents included must be submitted as a PDF. Appeals must be submitted within two weeks from the date your application outcome notification is sent. Notification of action on the appeal will be made via email, usually within 90 days of the appeal deadline.

Reporting Requirements, if Funded:

For funded awards through this program, there will be required scientific and financial reporting. Interim Scientific & Financial Reports must be submitted at the end of each reporting period as long as the grant remains active. Final Scientific & Financial Reports must be filed within 90 days of the grant's end date. All reports must be submitted electronically via proposalCENTRAL. The Financial Report must be approved and signed by someone with financial authority in the Office of Research and Sponsored Programs or Grants & Contracts Office at the recipient's institution. Unobligated funds remaining at the end of the award must be returned to the Alzheimer's Association.

Note: The continuation of the grant over the awarded duration is contingent upon the timely receipt of all required reports.

In addition, while animal welfare and human volunteer ethical assurances are not required at the time of application, investigators have until their chosen start date (within 6 months or less of award notification) to submit these approved documents. The Alzheimer's Association encourages investigators to initiate their certification applications on a schedule that recognizes that rDNA certification, IRB/IACUC approval at many institutions can take more than 90 days.

The Association accepts only certifications that apply specifically to the funded project and must include the name of the awardee.

Projects involving human volunteers must address the appropriate inclusion or exclusion of individuals in the proposed research project and describe recruitment efforts to represent the community in which the study is planned or being conducted. Prior to distribution of funding, the researcher must provide a description of their recruitment plan, including an outline describing how their recruitment efforts will ensure representative diversity in their volunteers. Recruitment efforts should focus on diversity within key target groups, including a diverse representation of (but not limited to): sex, gender identity, sexual orientation, socioeconomic status, race, and ethnicity. This will be tracked throughout the duration of the grant.

Electronic copies of publications, presentations and abstracts that report research supported by funds from the Alzheimer's Association must be submitted electronically at the time of publication. These copies will become part of the official file of the grant and will be provided to the Communications Division of the Alzheimer's Association to assist in the efforts to further inform the public about the International Research Grant Program of the Association. Any intellectual property disclosures resulting from the award must be submitted electronically at the time of publication. The Alzheimer's Association may request any of the research outputs listed here from any awardee up to 7 years following the end of the award.

U.S. Sanctions:

Alzheimer's Association grants are generally open to scientists and researchers across the globe; however, as a U.S.-based charity, the Alzheimer's Association is subject to, and complies with, U.S. law. As a result, the Alzheimer's Association cannot award, and will not award, grants in violation of applicable U.S. statutes and regulations. This means, among other things, that the Alzheimer's Association cannot, and will not, fund any individual or entity (i) that is subject to U.S. comprehensive or targeted sanctions or if awarding funding would result in a violation of such sanctions, (ii) that is on the U.S. List of Specially Designated Nationals or entities owned or controlled by such persons, or (iii) when doing so is otherwise prohibited by U.S. laws related to combating terrorism.

Nondiscrimination and Harassment Statement:

The Alzheimer's Association is committed to providing an environment free from harassment and discrimination. The Alzheimer's Association strictly prohibits harassment and discrimination based on race; creed; color; religion; sex; sexual orientation; national origin; ancestry; age; Veteran status; citizenship status; marital status; physical or mental disabilities; pregnancy, gender identity or expression (including transgender status); genetic information; and any other characteristic protected by federal,



state, or local law.

Contact Information:

For any inquiries or additional information, please contact a member of the Alzheimer's Association Grants staff at grantsapp@alz.org.

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