**Basics of Better Mental Health**

**Registration Form**

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| **Registration Information** | |
| **Principal Investigator Name**: | **Institution**: |
| **Email Address:** | **Position** (Title): |
| **Title of the Proposal:**  **Please indicate the language in which you will be submitting your Full Application so that Brain Canada can ensure appropriate reviewers are assigned.**  **English French**  **Keywords for the proposed research project (up to 10):** | |

**REVIEW PROCESS**

Registration Forms submitted by the deadline will undergo an administrative check and relevance review by Brain Canada to ensure alignment with the scope of this funding opportunity and all eligibility criteria are met. All applicants will be notified regarding the administrative check and relevance review of their application. Eligible applications will be invited to the Full Application stage; ineligible applications will be withdrawn from the competition.

**PROJECT INFORMATION**

Please send the completed Registration Form, along with the required attachments, as a PDF file to [mentalhealthgrants@braincanada.ca](mailto:mentalhealthgrants@braincanada.ca). The PDF and accompanying attachments will need to be formatted using 12-point Times 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 Investigator to ensure their submission adheres to these requirements and that it is received by 17:00 ET on June 27, 2023.

**Project Summary**

* Project title
* Keywords describing the research project (maximum 10 words)
* A summary of the research project and its goals (maximum one page), emphasizing the innovative and original features, and highlighting how sex-specific biological factors will be incorporated as a main point of interest in the study.

**Team Details**

List the names and affiliations of the Principal Investigator and any co-investigator(s) that are part of the team; the team must consist of two or more independent investigators from different institutions, or distinct research groups within the same institution. Please include a brief description of their roles in the proposed research project.

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

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

**OPTIONAL INFORMATION**

* Provide names and contact information for up to three individuals (within Canada and/or internationally) who are knowledgeable in the research area and would be able to evaluate the application. Individuals should not have a conflict of interest.

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

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

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

***By checking the boxes below, the Principal Investigator acknowledges that:***

Should funding be received, the research team will be in measure to initiate the funded project on February 1, 2024;

They have read and understand the *Eligibility* and *Use of Funds* criteria outlined in the Request for Applications.

***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 INVESTIGATOR SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_