

Date submitted:

Post-Market Drug Evaluation — Core Network Partner Competition

Letter of Intent Form

Interested applicants should complete this Letter of Intent (LOI) Form to indicate their intent to apply to receive grant funding as a Core Network Partner of the Post-Market Drug Evaluation network.

Section 1: Applicant Information

First name:

Last name:

Position and affiliation:

Credentials:

Email:

Phone:

Mailing address:

Section 2: Co-Applicant Information

Co-applicant 1

First name:

Last name:

Position and affiliation:

Credentials:

Co-applicant 2

First name:

Last name:

Position and affiliation:

Credentials:

Co-applicant 3

First name:

Last name:

Position and affiliation:

Credentials:

Co-applicant 4

First name:

Last name:

Position and affiliation:

Credentials:

Co-applicant 5

First name:

Last name:

Position and affiliation:

Credentials:

Section 3: Host Institution

Full name of host institution:

Section 4: Team Information

Title of team and, if applicable, acronym:

Brief description of the team's expertise and strengths (*maximum 100 words*):