



## REQUEST FOR PROPOSALS

### RARE EPILEPSY PARTNERSHIP AWARD

CURE Epilepsy’s grant programs seek to accelerate promising research leading to new treatments and cures for people living with epilepsy. CURE Epilepsy prioritizes innovative projects that address our mission, affirming our core belief that the only acceptable final goal is “no seizures, no side-effects.”

**CURE Epilepsy: Our mission is to cure epilepsy, by promoting and funding patient-focused research.**

We identify and fund cutting-edge research that may lead to new approaches for curing epilepsy, challenging scientists worldwide to collaborate and innovate in pursuit of this goal. Our commitment is unrelenting.

We encourage applications from groups identified as nationally underrepresented in the biomedical, clinical, behavioral, and social sciences. These groups include individuals with disabilities, veterans, persons from underrepresented racial and ethnic groups and gender diverse groups, women in biomedical-related disciplines, or any other characteristic protected by federal, state, or local law are encouraged to apply.

U.S. citizenship is not required. Researchers outside the U.S. are also encouraged to apply.

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## REQUEST FOR PROPOSALS

### PRIORITY AREAS

CURE Epilepsy funds research that has the potential to truly transform and save lives. The purpose of this funding opportunity is to stimulate and accelerate discovery on rare epilepsies through the development of necessary research tools, techniques, model systems, and data collection platforms. Applications that are strictly focused on basic research including but not limited to gene discovery, understanding cellular pathways and mechanisms, basic electrophysiology etc., without a research tool building component will be given lower priority. This award is not intended to fund research focusing solely on a comorbid condition associated with a rare epilepsy without also seeking to develop tools to understand the causes and treatments for the accompanying seizures.

Each award will be co-funded by CURE Epilepsy and one or more of the rare epilepsy advocacy groups (partners) identified below. Applications must focus on one or more of the specific rare epilepsies that are represented by each group as well as address CURE Epilepsy's mission to cure epilepsy. Applications must clearly identify the rare epilepsy(ies) that the research is directed towards.

General priority areas for this program include:

- Development of rare epilepsy-specific cellular models including but not limited to patient-derived stem cells, iPSC lines, 3D organoid models or fused organoid models.
- Development of appropriate genetic animal models.
- Development of novel *in-vitro* or *in-vivo* assays or techniques, for example, drug screening platforms, to enhance research in rare epilepsy.
- Development of research tools and novel techniques to enhance understanding of the cellular, molecular, genetic, and systems-level biology that leads to rare epilepsy, as well as facilitate the investigation of disease-modifying or preventative strategies.
- Supporting registries to better understand the natural history of one or more rare epilepsies or to look across rare epilepsies to identify common therapeutic targets and/or pathways. Projects utilizing existing registries or databases are allowed and must clearly articulate the specific rare epilepsy that will be studied. Use of registry platforms that ensure patient access to their data and when appropriate integrate with existing data collection platforms to enable data sharing with researchers and patient advocacy groups is strongly encouraged.
- Use of Electronic Health Record data to better understand the disease burden of rare epilepsy and develop therapeutic strategies.
- Development of technologies that will accelerate accurate diagnoses for rare epilepsies.

**An overarching goal of this funding mechanism is to develop resources and data that will be made available to the research community to accelerate research on rare epilepsies.**

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Research priorities for each partner are described below. *Preference will be given to projects that specifically address one or more of these priorities.*

### **Dup15q Alliance**

<https://dup15q.org/>

Dup15q Alliance empowers individuals living with dup15q syndrome and other related rare diseases to reach their full potential by advancing breakthrough research and life-changing therapeutic treatments, supporting families affected by dup15q, and promoting advocacy. Specific research priorities include:

- a. Development of tools to test the hypothesis that normalization of Ubiquitin protein ligase E3A (UBE3A) overexpression via antisense oligonucleotides (ASOs) is a plausible therapeutic strategy for treating Dup15q epilepsies.
- b. Using a *Drosophila* Dup15q model to test a small molecule library of FDA-approved compounds to rapidly identify potential therapeutics for off-label trials.
- c. Novel techniques to investigate whether genes other than UBE3A, for example, GABRB3, GABRA5, and GABRG3, HERC2, or ATP10A, within the 15q11-q13 region can contribute to the seizure phenotypes seen in Dup15q syndrome.

### **International Foundation for CDKL5 Research**

<https://www.cdkl5.com/>

The International Foundation for CDKL5 Research is committed to treating and curing CDKL5 Deficiency Disorder (CDD) by funding scientific research while helping affected individuals and their families to thrive. Specific research priorities include:

- a. Development of screening tools to detect phosphorylation of CDKL5 targets by potential new therapeutics. Example: rabbit monoclonal phospho-specific antibodies against Elongin A (ELOA) or E1A Binding Protein 400 (EP400).
- b. Novel methods that enhance the understanding of the cellular, molecular, genetic, and systems-level mechanisms contributing to the pathogenesis of CDD, facilitating the continued investigation of disease-modifying strategies. Some examples of this CDD research priority include novel methods or tools to measure the association of seizures, autonomic dysfunction, and non-seizure comorbidities in CDD.
- c. Generating improved CDD disease models (cell-based, tissue-based, or animal models), for example, rodent models expressing CDKL5 variants outside the catalytic domain, to better assess the potential efficacy of CNS-directed therapeutic interventions.

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### **Koolen-de Vries Syndrome (KdVS) Foundation**

<https://kdvsfoundation.org/>

Koolen-de Vries Syndrome Foundation's mission is to educate, increase awareness and promote research for the support and enrichment of individuals living with KdVS and their families.

Specific research priorities include:

- a. Using available iPSC cell lines or brain organoid models to screen for new or repurposed therapies.
- b. Developing tools to investigate KAT8 Regulatory NSL Complex Subunit 1 (Kansl1) rescue as a therapeutic strategy for KdVS.
- c. Building a natural history study to characterize seizure types, age at onset, correlation of genotype with phenotype, and age-related changes in seizures in KdVS.

### **PCDH19 Alliance**

<https://www.pcdh19info.org/>

The mission of the PCDH19 Alliance is to improve the lives of children and families affected by PCDH19 epilepsy. The PCDH19 Alliance focuses on raising and directing funds to scientific research with the goal of finding better, more effective treatments and, ultimately, a cure.

Specific research priorities include:

- a. Building upon existing registries to capture the severe mental health disorders, such as schizophrenia, that is evident in the PCDH19 patient population as they age and to understand how this is related to epilepsy and the PCDH19 gene.
- b. Development of novel methods to treat PCDH19 related epilepsy including gene therapies, devices, or other repurposed therapeutics
- c. Creating new animal models of PCDH19 epilepsy that demonstrate a seizure phenotype as existing models are lacking in this regard.

### **Ring14 USA**

<https://ring14usa.com/>

Ring14 USA is a non-profit organization advocating for all those affected by the rare neurodevelopmental disorders of the 14<sup>th</sup> chromosome, in particular Ring Chromosome 14 Syndrome. Specific research priorities include:

- a. Identification of novel techniques to generate stable iPSC Ring14 chromosome lines. Current approaches to generating Ring14 iPSC lines result in unstable ring chromosomes that do not allow for the effective study of Ring14 syndrome. A key goal for Ring14 syndrome research is to identify novel methods that allow for the persistence of ring chromosomes for *in vitro* studies.

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- b. Innovative approaches to develop Ring14 neuronal or brain organoid models that can be used to study neuronal activity and brain development in Ring14 syndrome and to screen for drugs that may control pathological phenotypes.
- c. Identification of causal genes for epilepsy associated with Ring14 syndrome, including the development of novel techniques that may assist in such identification.

### **STXBP1 Foundation**

<https://www.stxbp1disorders.org/>

The STXBP1 Foundation is a parent-led advocacy organization leading the charge for a cure for epileptic encephalopathies and related neurodevelopmental disorders caused by changes in the STXBP1 gene.

Specific research priorities include:

- a. Development of preclinical model systems to further the understanding of the pathophysiological mechanisms of STXBP1 mutations and genotype-phenotype relationships. The generation of preclinical model systems such as cell lines, organoids, or animals using known pathogenic STXBP1 variants and/or Variants of Uncertain Significance (VUSs) will be an important resource when trying to understand not only genotype-phenotype relationships but also basic pathophysiological changes to nervous tissues cells.
- b. Development of biomarkers and clinical endpoints. STXBP1 disorders lack reliable CNS and non-CNS biomarkers that can be used for clinical drug development. Potential biomarkers could include CNS imaging (e.g., PET for neurotransmitters, magnetic resonance spectroscopy), EEG, metabolomics, fluid biomarkers (e.g., genes and proteins found in blood or CSF), or others to evaluate the efficacy of treatments to reduce seizures and other symptoms associated with STXBP1 mutations.
- c. Development of screening platforms to identify drugs that can increase the functional activity of the normal STXBP1 protein to counteract the haploinsufficiency associated with STXBP1 disorders is a key priority. The ability to repurpose FDA-approved drugs for new indications offers the opportunity to identify new therapies for the treatment of STXBP1 disorders and similar developmental encephalopathies.

### **The Cute Syndrome Foundation**

<https://www.thecutesyndrome.com/>

The Cute Syndrome Foundation raises awareness of SCN8A mutations, funds the dedicated and talented scientists researching SCN8A, and supports the families around the world who are affected by this disorder. Specific research priorities include:

- a. Development of novel techniques, models, or assays to improve understanding of how changes in alternative splicing regulate SCN8A function and disease, and *in-vitro* and *in-vivo* antisense

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- oligo (ASO) based strategies to reduce SCN8A expression levels.
- b. Development of novel techniques to understand how various neuronal populations contribute to the pathogenesis of SCN8A epilepsy especially in regions of the brain such as the hypothalamus, thalamus, midbrain, brainstem, etc.
- c. Establishing drug screening platforms using audiogenic seizures in SCN8A mouse models as a screening tool. Although audiogenic seizures are not common clinically, the susceptibility of the mice enables large-scale testing of drugs as a screening platform with substantially higher throughput than examination of spontaneous seizures.

## ELIGIBILITY REQUIREMENTS

This award is available to both established and early-career investigators. Established investigators are university faculty at the associate professor level or above, or investigators who hold an equivalent position in a non-university research organization. Early career investigators are defined as a) university faculty at the assistant professor level (or hold an equivalent position in a non-university research organization), b) researchers with an appointment as an instructor or research assistant professor, c) post-doctoral fellows with at least three years of post-doctoral experience or d) clinical fellows. Early career investigators must have a mentor committed to advising the applicant. A clearly articulated mentorship statement from the mentor must be submitted along with the application. See Letter of Intent and Full Proposal Instructions for details.

*Members of CURE Epilepsy’s Scientific Advisory Council and their research team members as well as scientific advisors associated with partnering organizations and their research team members are not eligible to apply.*

All materials must be submitted in English.

## AWARD TIMELINE

Activity	Key Dates
Open call for Letters of Intent	Tuesday, May 31 <sup>st</sup> , 2022
Letter of Intent deadline	Wednesday, June 29th, 2022, 9 PM ET
Full proposal invitations	Friday, August 5th, 2022
Full proposals due	Tuesday, September 13th, 2022, 9 PM ET
Anticipated awardee notification	December 2022-January 2023
Anticipated award start date	Spring 2023

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### BUDGET

Funding requests must be itemized and based on specific, milestone-defined scientific aims. Requests may be made for up to a maximum of \$100,000 paid over 1 year. CURE Epilepsy reserves the right to fund only select specific aims or stage funding of proposals based on achievement of milestones.

Budgets may include salary support for the Principal Investigator (PI), technical staff and/or co-PIs, supplies, animal costs, vendor costs, limited equipment cost, and travel to an epilepsy-related conference only if the PI is presenting his/her CURE Epilepsy-funded research. **Indirect costs are not supported.**

### LETTER OF INTENT INSTRUCTIONS (2-PAGE LIMIT)

All applicants must submit a Letter of Intent (LOI). The LOI should clearly and succinctly outline the specific aims and include a brief description of the justification and research plan according to the guidelines in this announcement.

#### Letter of Intent Instructions:

Below are instructions for the required **scientific summary** and **future directions** sections, which together can be no longer than two pages in length. LOIs exceeding two pages of text will not be reviewed.

1) **Scientific Summary:** Clearly and succinctly outline the milestone-based specific aims and anticipated research outcomes. Include a brief description of the proposed research plan and how it aligns with CURE Epilepsy's mission and the needs of the partnering organization who collectively seek to find a cure for epilepsy by accelerating research forward by leaps rather than by incremental steps (1 ½-page maximum). Early Career Investigators must identify a mentor who will advise on the development and execution of the research project.

2) **Future Directions:** Describe what next steps will be taken once the goals of your proposed project have been achieved (1/2-page maximum, including spaces). This must include clear steps to critical next stages in development or implementation of the research findings to advance research on the rare epilepsy syndrome. This section must also include a resource and data-sharing plan to make data, research tools, databases, animal or cellular models, and assays that result from this funding readily available to the research community. Examples of data and laboratory repositories where results and resources emanating from the work will be deposited are strongly encouraged.

A few points to note:

- Lower scores will be given to proposals that are not milestone-based and not achievable within a 1-year timeframe.
- Preliminary data is not required for this grant but may be submitted, if available. Graphs, figures, figure legends, and charts do not count toward the two-page text description of your project.



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- References are not required at the LOI phase. However, if you decide to include references, they do not count towards the page limit.

## FORMATTING GUIDELINES

- Type font: 12-point
- Type density: No more than 15 characters per inch (including spaces). For proportional spacing, the average for any representative section of text should not exceed either 15 characters per inch or 114 characters per line.
- Spacing: Single-spaced between lines of text, no more than five lines of type within a vertical inch.
- Margins: Minimum of 0.5-inch top, bottom, right, and 1-inch left.

## PROPOSAL CENTRAL INSTRUCTIONS

LOIs must be submitted through proposalCENTRAL (<https://proposalcentral.altum.com>). To begin an application, applicants will need to create a professional profile, if one does not already exist.

### Instructions for each section of the application in proposalCENTRAL:

- 1) *Title Page*: Enter proposal title (maximum 150 characters, including spaces).
- 2) *Download Templates and Instructions*: Download LOI guidelines and other available instructions (if provided) as needed.
- 3) *Enable Other Users to Access this Proposal*: Use this optional section to grant access to a collaborator or co-investigator.
- 4) *Applicant/PI*: This section should auto-populate from the applicant's professional profile. Double-check that the information is complete and correct. If it is not, click *Edit Professional Profile* to update the information. Indicate whether you are an early-career or established investigator. An early career investigator must have a committed mentor to advise on development and execution of the research project. *A letter of commitment from the mentor is required if invited to submit a full proposal.*
- 5) *Institution and Contacts*: Information should auto-populate from applicant's profile.
- 6) *Co-Principal Investigator (Co-PI)/Collaborators*: Please enter information for any co-PIs or collaborators, if applicable.
- 7) *Rare Epilepsy syndrome(s)*: Please select the specific rare epilepsy syndrome your project will address from the list. You may select up to 3.

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- 8) **Keywords:** Select at least 3 keywords from the list that best describe the specific focus of your research proposal.
- 9) **Current and Pending Support:** List all current and pending support for you and any co-investigators. Pending support includes any grant applications that you have submitted, but for which decisions have not yet been communicated. Current and pending support is required for the PI and co-PI but is not required for collaborators.
- 10) **Upload Attachments:** Once the LOI is finalized, attach it by uploading the PDF into this section of proposalCENTRAL.  
*Biosketch for PI:* Applicants may use NIH biosketch format if preferred over the provided template.
- i. **Please include a statement that clearly articulates the specific rare epilepsy(ies) that your work targets. Also describe your interaction(s) with a rare epilepsy-related patient community and how your proposed work will benefit them.**
  - ii. *Optional: Applicants are encouraged to provide statements regarding their commitment to fostering diversity, equity, and inclusion in their research environment (100 words).*
  - iii. *Optional: Applicants may include a ½ page section describing any life events or circumstances that contributed to delays or gaps in their career trajectory. This may include information that may not otherwise be apparent to reviewers and can help provide context as they evaluate your professional trajectory and achievements. Examples include but are not limited to: being a member of a community underrepresented in biomedical research, having experienced a life event that impacted career trajectory (such as parenthood, family, or medical leave), COVID-19 pandemic-related effects, having a learning or other disability, coming from a low-income family, and being the first in your family to go to college.*
- 11) **Validate:** The system will check for required components that have not been completed. Applicants will not be able to submit until all required components are completed.
- 12) **Submit:** Click *Submit* after your application has been successfully validated.

### FULL PROPOSAL NARRATIVE INSTRUCTIONS (10-PAGE LIMIT\*)

**Invited applicants should submit full proposals and include the following in the proposal narrative:**

**Specific Aims:** Clearly state the specific aims that will be addressed by this work. Each specific aim should be associated with a clearly articulated, measurable milestone in the research plan. Each aim and milestone must have a clearly identified budget.

**Background:** Describe the project background including the biological rationale and patient population for which the research is intended. Describe how the proposed approach will significantly enable



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treatment or prevention strategies.

**Preliminary Data:** Provide any preliminary data available at the time of submission.

**Research and Development Plan:** Detail the experiments that will be done to address each specific aim, details of research design and methods, the expected outcomes, potential pitfalls, and how results will be interpreted. If this is a collaborative proposal, briefly describe how the collaboration adds value to the application.

**Statement of Relevance:** Include one paragraph describing how the proposed research addresses the goal of curing epilepsy.

**References:** Please list all literature cited within the proposal. References do not count toward the page limit.

Proposals will be evaluated for innovation, feasibility, scientific merit, and alignment with the mission of this program to advance knowledge and tools targeted to a rare epilepsy syndrome.

\*The 10-page limit of the Proposal Narrative is inclusive of any figures, tables, graphs, photographs, diagrams, chemical structures, pictures, pictorials, and other relevant information needed to judge the proposal.

## FORMATTING GUIDELINES

- Type font: 12-point.
- Type density: No more than 15 characters per inch (including spaces). For proportional spacing, the average for any representative section of text should not exceed either 15 characters per inch or 114 characters per line.
- Spacing: Single-spaced between lines of text, no more than five lines of type within a vertical inch.
- Margins: Minimum of 0.5-inch top, bottom, right, and 1-inch left.

## FULL PROPOSAL INSTRUCTIONS FOR PROPOSAL CENTRAL

Full proposals must be submitted through proposalCENTRAL (<https://proposalcentral.altum.com>). To access your application, log in to proposalCENTRAL and go to the Manage Proposals tab. Below are instructions for each section of the online application:

- 1) *Title Page:* Enter proposal title (maximum 150 characters, including spaces).
- 2) *Download Templates and Instructions:* Access a copy of these guidelines and download a biosketch template if you have not already completed one. Instructions on completing your ORCID are also provided in this section.

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- 3) *Enable Other Users to Access this Proposal:* Use this optional section to grant access to co-investigators or collaborators, so they may review or enter information into the application.
- 4) *Applicant/PI:* This section should auto-populate from the professional profile. Double-check that the information is complete and correct. If it is not, click *Edit Professional Profile* to update the information. Indicate whether you are an early career or established investigator. An early career investigator must have a mentor to advise on development and execution of the research project and an articulated mentorship plan. CURE Epilepsy now requires an ORCID iD with all full proposal submissions. If your ORCID iD is not already provided on this page, enter your identifier in your Professional Profile by clicking *Edit Professional Profile*. Detailed instructions may be accessed in Step 2 of the on-line application – Download Templates and Instructions.
- 5) *Institution and Contacts:* Information should auto-populate from your profile.
- 6) *Co-Principal Investigator (Co-PI)/Collaborators:* Enter contact information for co-PIs and/or collaborators. Typically, Co-PIs are co-funded by the grant whereas collaborators are not.
- 7) *Abstract and Keywords:* Answer the questions in each box according to the instructions below:
  - a. *Lay Summary:* The lay summary will be reviewed by members of the rare epilepsy community who would benefit from this research. Please take special care to describe the proposed work and its potential to contribute to the advancement of research in language appropriate for a non-scientific audience. Include the following:
    - i. *Project Goals:* Bulleted list of goal(s) for the project.
    - ii. *Aims:* Bulleted list of how those goals will be tested.
    - iii. *Deliverables:* Bulleted list of tangible deliverables to result from this work, if successful.
    - iv. *Impact:* Briefly explain how the work, if successful, will contribute to advancement of knowledge and/or research tools for a specific rare epilepsy(ies). In this section, you may also explain the next steps in your research plan once the goals of your proposed project have been achieved.
  - b. *Scientific Summary:* Please provide a brief (250 word) scientific abstract of your project.
  - c. *Keywords:* Please select at least three and no more than seven keywords that are appropriate to the proposed project. The keywords will be used to align proposals with appropriate scientific peer reviewers.
- 8) *Specific Aims and Milestones:* Each specific aim should have a clearly defined outcome or milestone. For example, a specific aim screening a compound library in an organoid model might have a milestone such as: Test X number of compounds at \_ different concentrations in \_ organoid models derived from \_\_ patients. For each aim and associated milestone enter a short and long description.

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- 9) *Aims and Milestones Schedule*: Enter budget, start date and end date for each specific aim and associated milestone. Each specific aim should be associated with only one milestone. Do not enter multiple milestones per specific aim. The dates for different milestones can be overlapping.
- 10) *Budget Period Detail*: The maximum budget for this award is \$100,000 U.S. dollars (USD) over 1 year. Provide a detailed budget that is itemized and aligned with the specific aims and milestones identified in the proposal. Enter proposed start and end date for Period 1. Enter funds for personnel costs using template provided. For each personnel item entered, indicate the milestone(s) that will be associated with that item. Click *Save* to save changes. System will automatically calculate total for the section. Next, enter non-personnel costs for each category listed e.g., materials, supplies, travel, disposables, publication fees, etc., using the template provided. Vendor costs (if work will be sourced to a third party) can be included in the 'Other Expenses' category. Leave category blank if no expenses exist for that category. For each item entered, indicate the milestone that will be associated with that item. Please note that there is a travel cap of \$1,500 USD for international applicants and \$1,000 USD for U.S. applicants per year, which can be budgeted for a maximum of 2 investigators (the PI and Co-PI). Limited equipment purchases that are required to complete goals will be considered but must be clearly justified in the next section. Repeat steps above for Period 2. The 'copy Period 1 Forward' tab allows you to copy expenses entered in Period 1 into Period 2 and then edit as needed. **Please note that indirect costs and institutional overhead are not provided. Funds cannot be used to cover institutional expenses such as network charges, computer maintenance and services, insurance dues, or other miscellaneous expenses not directly related to performing the project.** All expenses must be converted to U.S. Dollars (USD).
- 11) *Budget Summary and Justification*: Review the summarized budget to ensure that details have been entered correctly. Provide a budget justification that clearly details how and where the funds will be used and why these expenditures are critical to the success of the proposed research.
- 12) *Current and Pending Support*: Enter all current and pending support for all PIs on the proposal. Please indicate if there is any overlap with the proposed work.
- 13) *Organization Assurances*: Answer the questions regarding use of human subjects, animals, recombinant DNA, and the possession of a Schedule 1 license should the work involve Schedule 1 substances.
- 14) *Proposal Narrative and Other Attachments*: Upload the following documents:
  - a. Proposal Narrative.
  - b. Facilities/Institutional Assurances (do not exceed ½ page): Provide a description of facilities available at the institution(s) where the work will be performed. If an institution does not have

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- an official assurance document, please provide, in writing, assurances from the department chairperson or practice colleagues confirming the applicant's time, facilities, and future position, if research is funded. Please submit facilities/institutional assurances for each PI.
- c. Biosketch for PI: Applicants may use NIH biosketch format if preferred over the provided template.
    - i. ***Please include a statement that clearly articulates the specific rare epilepsy(ies) that your work targets. Also describe your interaction(s) with a rare epilepsy-related patient community and how your proposed work will benefit them.***
    - ii. *Optional: Applicants are encouraged to provide statements regarding their commitment to fostering diversity, equity, and inclusion in their research environment (100 words).*
    - iii. *Optional: Applicants may include a ½ page section describing any life events or circumstances that contributed to delays or gaps in their career trajectory. This may include information that may not otherwise be apparent to reviewers and can help provide context as they evaluate your professional trajectory and achievements. Examples include but are not limited to: being a member of a community underrepresented in biomedical research, having experienced a life event that impacted career trajectory (such as parenthood, family, or medical leave), COVID-19 pandemic-related effects, having a learning or other disability, coming from a low-income family, and being the first in your family to go to college.*
  - d. Co-Investigator Biosketch: Upload biosketch for each co-investigator, if applicable.
  - e. Collaborator Letters of Support: Upload letters from collaborators indicating their support of the proposed work, if applicable.
  - f. Statement from mentor: A clearly articulated mentorship plan must be submitted for early career investigators.
  - g. Informed consent form: If applicable, provide a copy of the informed consent form for the proposed study.
  - h. Signed signature pages: Upload signed signature pages, which are generated in Step 15 of the application.
- 15) *Validate*: The system will check for required components that have not been completed. You will not be able to submit until all required components are completed.
- 16) *Signature Pages*: Click *Print Signature Page* to obtain a PDF of the document that needs to be signed by you (the submitting PI) and an institutional representative. After signatures have been collected, scan and upload to Section 13.

**Submit:** Please **make sure to Click Submit** once your application has been validated by the system.



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**Inquiries:** Questions regarding these guidelines are welcome and should be directed to the Research Team at [Research@CUREepilepsy.org](mailto:Research@CUREepilepsy.org) or 312-255-1801.