

**Instructions Guide for Hearing Health Foundation
Ménière's Disease Grants (MDG) Application**
(You can also download these instructions once you log in to the online application)

Applications Due by **January 15, 2019**

The application works best in Firefox and Chrome browsers and it is recommended to use one of these for submission.

This Instructions Guide contains links to several document templates for you to download, complete, and upload on Page 2 (Attachments) of the online application to complete your submission.

We **STRONGLY** recommend logging into the system prior to the day of the deadline to ensure you are familiar with how it works and what is required.

You may start your application, save it and come back later to submit. Saving does NOT equal submitting; please ensure to click 'Submit' on Page 3 of the online application once you have completed inputting your application information and uploading all application files. **Incomplete applications, or applications that do not follow the instructions outlined below, will automatically be disqualified.**

Upon application submission, HHF staff will compile all of your information into a final application PDF package which will be emailed to you the week following application submission. You will have 48 hours to review this PDF and if a page is missing or something is incorrect you can request a modification. You will not be able to modify or change any of the actual application information at this time.

1.) Prior to submitting an application, all applicants must complete an eligibility quiz. Only eligible applicants who pass the quiz will be able to Register and Submit an Application. If you do not pass the eligibility quiz, you will be directed to the HHF Policy on Ménière's Disease Grants detailing eligibility for this program. If you have questions about eligibility, contact grants@hhf.org.

To start the quiz go to:

<https://hearinghealth.foundationconnect.org/grantsmanager/Pages/V3/Portal/eligibilityquiz.aspx?OrgID=00D700000001qzZ&QuizID=a0h39000008Bp5f&lang=en>

2.) Once on the main homepage click "Register" (2) to create an account as shown below.

*If you already have a Username and Password should **NOT** register again. Log In with your Username and Password previously used. Contact grants@hhf.org if you have questions regarding this.*



Following hints to serve you better

If you are a first time user of our online system, please [click here](#) to register. If you are a returning user, please enter your username and password at the right. If you have previously registered, but have forgotten your password, please [click here](#) to receive a temporary password.

Username

Password

Login [Can't access your account?](#)

New Portal User

- 3.) After clicking “Register,” you will be directed to the registration page (as shown below) where you should complete all of the requested information and then click “Save”.

Register

Salutation

First Name

Last Name

Middle Initial

Suffix

Title

Contact Information

Email Business Phone

Confirm Email

Address Information

Mailing Street
255 characters remaining

Mailing City

Mailing State/Province

Mailing Zip/Postal Code

Mailing Country

Foundation Connect User Info

Username

Password

Confirm Password

Organization Name & EIN

Organization Legal Name

EIN

- 4.) After clicking “Save,” you will be directed to the screen below where you should click “Log In.”

Your user account has been created.

[Login](#)

5.) Then you will be directed to the main homepage where you should Log In with the Username and Password that you just created.



Following hints to serve you better

If you are a first time user of our online system, please [click here](#) to register. If you are a returning user, please enter your username and password at the right. If you have previously registered, but have forgotten your password, please [click here](#) to receive a temporary password.

Username

Password

[Can't access your account?](#)

New Portal User

If you forget your password at any point click the “Can’t access your account?” button where you can enter your username and your password will be emailed to you. Contact grants@hhf.org if you have trouble logging in.

Once logged in, you can change your password to one of your choosing by clicking on ‘Profile’ in top right corner and then navigating to ‘Change Password.’



[My Submissions](#) [Profile](#) [Logout](#)

Contact Info Organization **Change Password**

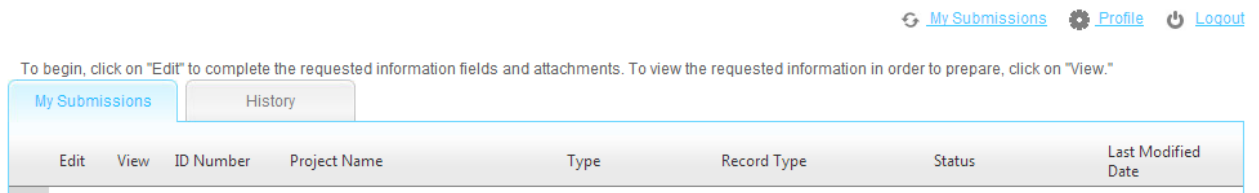
Change Your Password

Old Password:

New Password:

Confirm New Password:

- 6.) To begin completing your application, Click on 'My Submissions' in the upper right corner, where you will see your application listed , then click the 'Edit' button on the far right side.



- You may also choose to View all the application fields so you can prepare this information ahead of time and then come back to the web to submit (no later than the aforementioned deadline). We **STRONGLY** recommend logging into the system prior to day of the deadline to ensure you are familiar with how it works and what is required.

- 7.) Begin your application on Page 1 (Details):



[My Submissions](#) [Profile](#) [Logout](#)



THE INSTRUCTIONAL INFORMATION REQUESTED ON PAGE 1 CAN BE FOUND WHEN YOU HOVER OVER THE QUESTION MARK (?) ICONS NEXT TO EACH QUESTION. For your reference, this same instructional information is also included starting on the next page of this guide along with the application fields. The field character limits at the bottom right hand corner of each text box DO include spaces and red lines indicate required fields.

Begin Application Information

Please indicate applicant's last name, funding year, institution. ?

Proposed Title of Research ?

500 characters remaining

Research Area

- Auditory Development
- Auditory Physiology
- Central Auditory Processing Disorder
- Cochlear Implants
- Congenital Hearing Loss

Other Research Area

252 characters remaining

Request Number 13-02331

Deadline to Apply 8/30/2013

The following application information fields are to be completed on Page 1 (Details):

- Research Topic Area: please select **Ménière's Disease**.
- Please ensure applicant's last name, funding year, institution in the second field is accurate (for example: **Smith–2019–Hearing Health Foundation** as this is how HHF will track your application internally).
- Proposed Title of Research (500 characters max)

- **Institution Information (including EIN)**
 - Your Contact Information is pre-populated from your Registration. Please confirm all remains accurate or make any changes as needed.
 - Complete the information for your Department, Department Head, and Department Phone.
 - Insert your Financial Officer Name, Title, Mailing Address, Email, Phone (255 characters max)

- **Brief PI Biosketch**
 - Insert 3-4 sentences that HHF can use on our website and other publications should you be awarded funding. (750 characters max)
 - Note: you will upload the full PI Biosketch (following NIH format) on Page 2 (Attachments).
 - [Click here to download an NIH Biosketch example.](#)
 - Insert how you heard about this funding program.

- **Co-PI information (if applicable)**
 - Do you have co-principal investigator(s)? Indicate Yes or No
 - If you do have co-principal investigators, how many do you have? Indicate the number
 - List all Co-PI contact information (5,000 characters max) including:
 - Full first and last name
 - Suffix
 - Title
 - Institution Name
 - Department
 - Department Head
 - Address (only list if it is different from yours)
 - Phone
 - Note: you will upload the full Co-PI biosketch (following NIH format) on Page 2 (Attachments).
 - [Click here to download an NIH Biosketch example.](#)

- **Research Plan Highlights:** Your full Research Plan will be uploaded on Page 2 (Attachments), see below for instructions on what to include in the full Research Plan.

Research Plan highlights to be completed on Page 1 includes:

- Abstract (3,000 characters max)
 - Provide an abstract in layman's terms in 500 words or less.
- Keywords (260 characters max)
 - List 3 keywords or phrases related to your research. Separate by commas.
- Long term goals (5,000 characters max)
 - Describe your long term research goals for this project. Please highlight the impact of the research to those with hearing loss.
- Clinical Application (3,000 characters max)
 - Enter in the steps of progression of the potential clinical application (s) of the research.
- Methodology/Techniques Used Keywords (500 characters max)
 - Please list Keywords ONLY for your proposed methods and techniques used for this project.
 - For example: confocal microscopy, immunofluorescence, electrophysiology, auditory brainstem responses, optogenetics, etc.
- How is this Research Emerging? (3,000 characters max)
 - Discuss how this research addresses a question or a set of questions that are new, or apply a new approach to an established question or set of questions. Discuss how this research is distinct from the mentor's (or Co-PI's) lines of research.
- Describe the Pathway to Independence (3,000 characters max)
 - Please describe how this work will directly lead the applicant on a pathway to independence.
- Relation to Hearing Health (7,500 characters max)
 - If this project is studying the vestibular system, please describe how it will relate to hearing health and help better understand the auditory system.
- If you are utilizing Vertebrate Animals or Human Subjects, please indicate status of your IACUC or IRB approval on Page 1 (Details) and upload approval letters if received on Page 2 (Attachments).
 - If IRB or IACUC approval is pending, please email the approval once received to grants@hhf.org.

Budget

- Insert the total amount requested for this project below. \$125,000 is the maximum that can be requested for two-year project period, including indirect costs at 10% maximum. Then, [click here to download the Budget Template](#), complete it and upload as a PDF on Page 2 of the online application.
- A justification for your budget must also be uploaded on Page 2.
- Note PI and Co-PI can receive no salary. For information on allowable expenses, please consult our Policy (<https://hhf.org/mdg-policy>.)
- Funds are not transferable without prior written approval. Unused funds are to be returned to HHF at the termination of the award, or funding period (whichever occurs first), for which the project was supported.

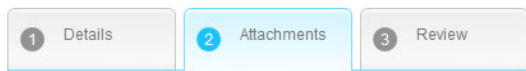
Research Support

- Insert Total Amount of Current Research Support for PI (Direct Costs ONLY/per annum). If PI is **NOT** receiving any current research support, **enter \$0**. Do NOT include Co-PI current support in the total inserted here.

- Then, [click here to download Current and Pending/Planned template](#), complete it with current research support and pending or planned support for PI (and Co-PI if applicable). Please upload letters confirming your support and abstracts along with the template for both PI and Co-PI.
 - See below for further instructions on uploading items.
- Indicate years of prior HHF (or DRF) funding PI Received
 - Agree to Funding Agreement & Conflict of Interest Statement
 - Once you complete Page 1, save and continue to Page 2.

8.) On Page 2 (Attachments)

Please ensure to upload PDF documents only and combine multiple documents for each field into a single PDF (5MB max file size for each field below). If you do not have Adobe Standard or Professional, you can use the [free PDF Editor](#) to do combine PDF documents.



Application Files to upload include:

(Label all attachments with name of document in first line of the body of the document)

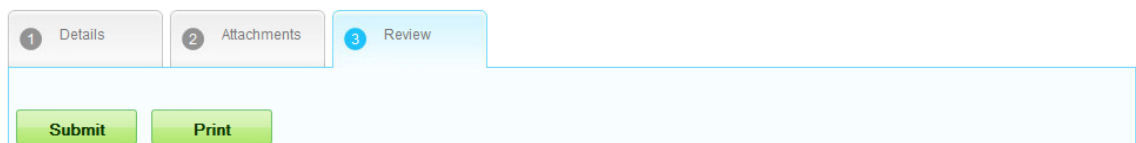
- Required: PI's Biosketch
- Co-PI's Biosketch
- Required: [Click here to download the Performance Sites & Facilities, Key Personnel, Major Equipment Template](#), complete it and upload on page 2 along with letter (s) permission to access performance sites/facilities/major equipment (if applicable); combine into a single PDF.
- Required: Completed Budget Template (downloaded from link above)
- Required: Budget Justification
 - Compile a justification of your proposed budget.
- Completed Current and Pending or Planned Research Support Template (downloaded from link above) as well as abstracts for both PI and Co-PI (ensure to label letters and abstracts appropriately with names for PI and Co-PI).
 - Please upload letters confirming support and abstracts for PI & Co-PI along with the template; combine into a single PDF.
- Required: Research Plan (no longer than 7 pages maximum; Font size 11, minimum margin with of 0.5 inches, max of 6 lines per vertical inch; images, tables, diagrams, etc. must be included in page maximum) to include:
 - Specific Aims:
 - List the long-term objectives and the specific aims of the project. State the hypothesis to be tested, if applicable.

- Background & Significance
 - Present the background leading to the present application including supporting data, previous work, and results obtained on this subject. Identify the gaps which the project is intended to fill. Link the specific aims to the long-term objectives.
- Preliminary Data
 - Present preliminary studies pertinent to the application information; establish the experience and competence of the investigator.
- Research Design & Methods
 - Describe the research design and the procedures to be used to accomplish the specific aims of the research for the grant period.
- Compile one document which encompasses: List of all Cited References (REQUIRED), Glossary to define terms used in your application (REQUIRED), & Appendix (OPTIONAL)
 - List all cited references
 - Glossary should be no longer than 2 pages maximum.
 - Appendix can include surveys, questionnaires, and selected publications for PI, Co-PI, Key Personnel related to the proposed research project
 - Only those publications accepted following peer review or in press, yet NOT available online will be accepted here.
- IACUC or IRB Approval Letter (if applicable)

9.) On Page 3 (Review & Submit): Review all of the information on this page.



Then when you are ready to submit your application, click 'Submit.'



If you click 'Print' from Page 3, it will only print the application information you input into Page 1 and a listing of your application file attachments (not the text of the actual attachments).



AFTER SUBMISSION, HHF STAFF WILL COMBINE ALL OF YOUR SECTIONS FROM PAGE 1 AND PAGE 2 INTO A FINAL PDF APPLICATION DOCUMENT. THIS DOCUMENT WILL BE SENT TO YOU VIA EMAIL DURING THE WEEK AFTER APPLICATION SUBMISSION AND YOU WILL HAVE 48 HOURS TO REVIEW IT TO ENSURE IT IS COMPLETE. IF SOMETHING IS MISSING OR INCOMPLETE YOU MAY REQUEST A MODIFICATION. YOU WILL NOT BE ABLE TO CHANGE ANY OF THE APPLICATION INFORMATION AT THIS TIME.

You will be notified of the decision on your application in Spring 2019. Should you have any questions prior to then, please contact grants@hhf.org.

Thank you for applying to Hearing Health Foundation's Ménière's Disease Grants program!