Weston Family Foundation

Letter of Intent

Rapid Response 2026: Biomarkers

DEADLINE: **March 17, 2026, 2:00pm ET**
Applicants will be notified of proposal invitations in June 2026.

Applicants may receive questions from the review committee (via Foundation staff) by April 14, 2026. Responses must be submitted by end of day April 21, 2026.

This Letter of Intent is an example only. Do not complete this paper application.
Please submit the Letter of Intent online through the Foundation's grant management system. Please visit our program webpage for more details.

Application Number:

Principal Applicant:

Project Title:

Applicant Details

	Team Members	Organizations	Primary Contact Information	Role in Project	Estimated Time Spent on Project
1.	Salutation: First Name: Last Name:	Primary Organization: Position Title: Other Affiliations/ Position Titles:	Address: Phone: Email:	☐ Principal Applicant ☐ Co-Applicant ☐ Collaborator	%
2.	Salutation: First Name: Last Name:	Primary Organization: Position Title: Other Affiliations/ Position Title:	Address: Phone: Email:	☐ Principal Applicant ☐ Co-Applicant ☐ Collaborator	%

Note: Projects are not limited to two team members as laid out on this sample application form; projects may include as many team members as needed for the successful execution of the project.

Weston Family Foundation

Application Overview

1. **What type of biomarker is being developed as the primary goal of the project?**
(Please select only those that apply to the biomarker being developed as the primary goal of the project)

☐ Biological
☐ Functional
☐ Digital cognitive/behavioural

Indicate the specific biomarker being developed: *(maximum 30 words)*

2. **What is the primary purpose of the biomarker?**
(Please select only those that apply.)

☐ Staging – indicate where individuals are in the disease pathway
☐ Diagnostic – identify individuals with a particular disease or disease subtype/subset, or correctly rule out those who do not have the disease
☐ Prognostic – indicate future clinical progression
☐ Differentiation – distinguish a specific type/subtype of neurodegenerative diseases of aging from other type(s)/subtype(s)
☐ Progression – objective measure of disease progression

3. **What phase(s) of biomarker development does the project cover?**
(*Please select only those that apply. There is no benefit to selecting more phases than fewer phases*)

☐ Analytical validation
☐ Clinical validation
☐ Clinical utility
☐ Clinical implementation

4. **Research will have a significant impact in which neurodegenerative disease(s) of aging?**
(Please select only those that apply. There is no benefit to selecting more diseases.)

☐ Alzheimer's disease
☐ Dementia with Lewy bodies
☐ Frontotemporal dementia
☐ Multiple system atrophy
☐ Parkinson's disease
☐ Progressive supranuclear palsy
☐ Vascular contributions to the listed diseases (not stroke-mediated vascular disease)
☐ Prodromes to the listed diseases (please also check the disease(s) to which your condition is a prodrome)

5. **Relevance of proposed work to the Foundation's mandate:** Explain how the biomarker you are developing will improve early detection and timely and accurate diagnosis of neurodegenerative diseases of aging. *(maximum 200 words)*

Weston Family Foundation

6. **Have you applied to the Weston Family Foundation (which includes the Weston Brain Institute) previously with *similar* proposed work?** If so, specify the previous application title and program applied to. Briefly explain how this application is different than the previously submitted work.
(This information will not be used to assess the application.)

☐ Yes
☐ No

7. **Have you applied to other funding agencies with the same proposed work?**
(This information will not be used to assess the application.)

☐ Yes
Please specify:

☐ No

8. **Is this your first time applying for a grant from the Weston Family Foundation?**
(This information will not be used to assess the application.)

☐ Yes
☐ No

9. **Is this your first application for a research grant specifically in the area of neurodegenerative diseases of aging?**
(This information will not be used to assess the application.)

☐ Yes
☐ No

Please list the full names of any individuals who are competitive with you and therefore should not review your application. Please do not exclude reviewers for other reasons as we are unable to honour those requests. Type "None" if you have no reviewer exclusions. *(maximum 65 words)*
(This information will not be used to assess the application.)

Weston Family Foundation

Project Information

Before completing the project information requested below, please refer to the following sections in the Program Details document: ***Section 1: Project Scope***, ***Section 3: Intended Outcomes and Impacts***, and ***Section 6: Review Criteria***.

1. **Central hypothesis, goals and specific aims.**
   Aims should complement each other and address the stated goals and hypothesis(es). *(maximum 300 words)*

2. **Novelty, significance, and impact:** Clarify the innovative aspect of the project and how this project is different than what is currently studied. Why is it important that the proposed work be carried out (i.e., how would the results advance the research and development of this biomarker for neurodegenerative diseases of aging across diverse populations in Canada?) Please do not include background information (e.g., pathology, etiology or incidence/prevalence) of neurodegenerative diseases of aging. (*maximum 200 words*)

3. **Experimental approach:** Please outline how the proposed work will be carried out and interpreted. *(maximum 600 words)*

4. **List of publications cited in the application:** Please include full citations with PMID. (*maximum 25 references)*

Preliminary data: A maximum of 1 page of preliminary data that best supports the application is required and can be uploaded as a PDF file, e.g., figures or tables.