



## **Instructions Guide for Hearing Health Foundation Emerging Research Grant Letter of Intent (LOI) Submission**

***(Please read these instructions thoroughly and follow the steps indicated below to submit an LOI. Applicants who do not follow these instructions will not be considered.)***

For any questions regarding this process, please contact [grants@hhf.org](mailto:grants@hhf.org).

First Year Letters of Intent Due by **October 28, 2016 by 5pm ET.**

Second year applicants are no longer eligible to apply. Applications must only be submitted in one of the stated research topic areas below. Applications outside of these areas will not be considered.

This online LOI works best in Firefox and Chrome browsers; it is recommended to use one of these.

- 1.) Prior to submitting an LOI, all applicants must complete an eligibility quiz consisting of 5 short questions which shouldn't take more than 5 minutes.

Only eligible applicants who pass the quiz will be able to Register and Submit an LOI. If you do not pass the eligibility quiz, you will be directed to the HHF Policy on Emerging Research Grants detailing eligibility for this program. If you have questions about eligibility, contact [grants@hhf.org](mailto:grants@hhf.org).

To start the quiz go to:

<https://hearinghealth.foundationconnect.org/GrantsManager/Pages/EligibilityQuiz.aspx?OrgID=00D700000001qzZ&QuizID=a0h70000003KTt3&InquiryRT=012700000009itk>

- 2.) After an eligible applicant passes the quiz, click "Continue" (1) and then once directed to the main homepage click "Register" (2) to create an account as shown below.

*Note: Applicants who submitted an application or LOI for the 2013 or 2014 funding cycle and already have a Username and Password should **NOT** register again. Log In with your Username and Password previously used. Contact [grants@hhf.org](mailto:grants@hhf.org) if you have questions regarding this.*

1

Thank you for completing the eligibility quiz for HHF's Emerging Research Grants program. Click continue to register and begin your Letter of Intent. If you already have a Username and Password, Log In to complete your LOI (please do not register again).

Continue

Exit



**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

2

- 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

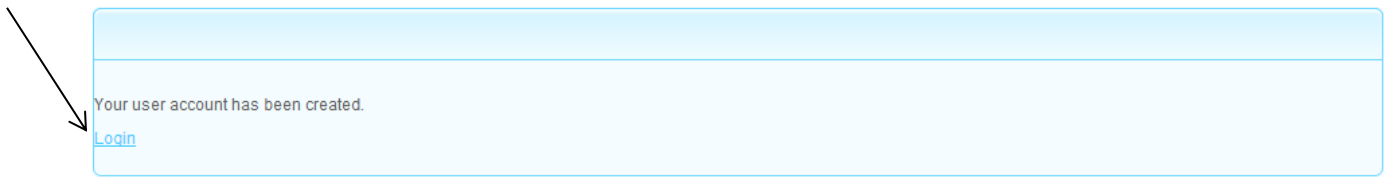
Confirm Password

**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.”



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

A screenshot of the Hearing Health Foundation homepage. At the top is the logo with the text "Hearing Health Foundation" and "Prevention | Research | Cure". Below the logo is a 5-step process bar for applying online for grants. To the right is a login form with fields for "Username" and "Password", a "Login" button, and a "Can't access your account?" link. Below the login form is a "New Portal User" section with a "Register" button. A text box on the right contains instructions for password recovery, with an arrow pointing to the "Can't access your account?" link.

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](mailto:grants@hhf.org) if you have trouble logging in.

6.) Upon logging in, you will be directed to complete your LOI as shown below.  
*Note: For your reference, all of the requested LOI information begins on the next page of this Guide should you wish to prepare this information ahead of time.*

Please make sure to click "Save" if you begin your LOI and want to come back later to continue working and to submit. If you click "cancel" (right hand side of page) it will cancel your LOI and you will need to begin again from Step 1 of this Guide.

Make note of the character counters in each field. These DO include spaces. The red lines next to fields indicate Required fields.

Help text for each field is provided when you hover over the question mark icon next to each information field. This is also provided on the next page of this Guide for reference.

Requested LOI information is as follows:

- Research Topic Area (ONLY THOSE APPLYING INTO ONE OR MORE OF THE TOPIC AREAS BELOW WILL BE CONSIDERED)
  - Central Auditory Processing Disorders
  - General Hearing Health
  - Hearing Loss in Children
  - Hyperacusis
  - Meniere's Disease
  - Stria
  - Tinnitus
  - Usher Syndrome
- Applicant Information
  - 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.
- Applicant Institution:
  - Your Institution Information is pre-populated from your Registration. Please confirm all remains accurate or make any changes as needed.
- 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
- Email
- Proposed Research Overview
  - Proposed Title of Research (500 characters max)
    - Insert proposed title of your research and note you will be able to modify this if invited to submit a full application.
  - Description of Research (2000 characters max)
    - Describe briefly the proposed research in less than 200 words. You will be able to modify this if invited to submit a full application.
  - 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.
  - How did you hear about the Emerging Research Grants program?
    - Choose one from the following:
      - An email from Hearing Health Foundation
      - I'm a current HHF awardee
      - I'm a former HHF awardee
      - Referral from colleague at my institution
      - Referral from colleague at a different institution
      - An email from another source
      - Social Media
      - Staff at HHF
      - Web Browsing
      - Other (if you choose Other, please write in your other lead source in the field below.)

7.) After you complete the information detailed above, Click "Save" and then "Continue." This will take you to the section for Attachments where you should upload a letter of support from your mentor for this project that is counter-signed by the chair of your department.

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

The screenshot shows a navigation bar with three tabs: '1 Details' (active), '2 Attachments', and '3 Review'. Below the tabs are two green buttons: 'Continue' and 'Edit'. An arrow points from the 'Continue' button to the text above. At the bottom, there is a section labeled 'Applicant Information'.

8.) After you upload your letter of support, click “Continue” which will take you to the section to Review all of your information prior to submission.

1 Details 2 Attachments 3 Review

Continue

Please upload a letter of support from your mentor, that is counter-signed by the chair of your department.

Select Upload

Continue

9.) After you review all your information, click “Submit.” Once submitted, you will not be able to edit the information any further. Note: Saving does not equal submitting. You must submit to be considered.

My Submissions Profile Logout

1 Details 2 Attachments 3 Review

Submit Print

Applicant Information

All applicants will be notified of their status prior to the opening of the Full Application per the dates given below. Those applicants invited to submit a Full Application will be provided a separate Instructions Guide which will detail the process for application submission.

Full application will open early November, Application Due: **December 2, 2016 by 5pm ET.**

Thank you for your interest in HHF’s Emerging Research Grants program!