

**MARATHON OF HOPE CANCER CENTRES NETWORK**

**EOI Form: Return of Results Platform/Tool**

**Deadline for Submissions: February 12, 2024 (12:00 pm PT / 3:00 pm ET)**

**Submit to: Kaitlin Hong Tai, Network Program Manager,** **khongtai@tfri.ca**

1. **CONTACT INFORMATION**

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| **Name of Applicant1:** |  |
| **Applicant’s Title:** |  |
| **Email:** |  |
| **Phone Number:** |  |
| **Company/Institution:** |  |
| **Platform/Tool Name:** |  |

1Applicant will act as the point person for communications and delivery.

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| **Applicant Signature** |
| *Print Name:* |
| *Signature:* |
| *Date:* |

Through the signature of the above authorized officials delegated to sign on its behalf, the Company affirms it has the capacity in law to be responsible for the activities as detailed in the proposal. The Company will provide the Applicant with the time, space and designated support to complete the project as described, and to complete reporting and financial statements as required.

1. **DESCRIPTION**

Provide a description of the platform/tool including available features. Please include an explanation of equity, diversity and inclusion considerations in place, such as bilingualism and the ability to add additional languages. (500 words maximum)

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1. **GOALS, ALIGNMENT AND NETWORK**

Provide the context and goals of the platform/tool, including processes, and explain its alignment to [MOHCCN](https://www.marathonofhopecancercentres.ca/). Include a description of the company’s existing relationships with genetic counsellors, geneticists, clinicians, and other research and health care professionals. (500 words maximum)

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1. **CUSTOMIZATION & DELIVERABLES**

To what extent is the platform/tool adaptable to the needs of MOHCCN Cohorts or to varying provincial or clinical requirements? Approximately how long do customizations take to develop? (300 words maximum)

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1. **CLINICAL VALIDATION, PRIVACY AND SECURITY**

Describe the clinical validation process, privacy impact and security threat risk assessment review processes in place, and data storage processes and options. (500 words maximum)

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1. **COST**

Provide an estimated cost, indicating one-time costs and annual costs, below. A more detailed budget and timeline will be discussed after the EOI process.

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| **Total One-Time Costs:** | $ |
| **Total Annual Costs:** | $ |
| **Total Cost:** | $ |



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 **Appendix A - Eligible Expenditures for Projects**

Eligible expenditures are identified in approved workplans and budgets, as detailed in an annual agreement to be signed between the applicant and TFRI, and must be directly used to provide deliverables for the approved workplan.

**Ineligible Expenses include:**

1. Expenditures before or after the RPGA Period of Performance term dates1.
2. In-kind contributions or allocations.
3. Indirect costs or allocations.
4. Equipment not included in the approved RPGA project budget.
5. Grants, sub-grants, or other award costs.
6. Academic support/fees for trainees/students such as stipends or fellowships.
7. Overhead or any infrastructure charges (i.e., institutional, department, building maintenance, rent, insurance, library, etc.).
8. Telecommunication costs not wholly auditable as directly used up in the approved project, such as monthly cellular plans, home internet, etc.
9. Entertainment or hospitality costs.
10. Membership or professional development fees.
11. Activities not part of the approved project scope in the RPGA.
12. All standard of care costs for a patient, including those patients enrolled on a clinical trial or another research project.
13. Unreasonably high or unusual rates charged to the project.
14. Lobbying-related expenses.

*Last update October 2023. This eligible summary will be updated as needed.*