

## NIH e-C3i Application



NIH BRAIN Initiative

NIH Grant Number:	Grant?
Title of Grant:	
Academic Institute/ Company:	
Name of Team Lead: (Does not have to be PI on the Grant)	E-mail:
Team Members:	E-mail: (for each team member)

## 1. Problem/Unmet Need



## NIH e-C3i Application



2. Proposed Solution

3. Impact/Significance

4. Competition



## NIH e-C3i Application



5. Status	/Intel	lectual	Property	(IP)	)
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6. Key Challenges

7. Team