

Granting agency/Funding opportunity:

Title of proposal being submitted

Deadline for submission

Principal investigator on application (underline, if a CIDsCANN PI/co-PI)

Co-investigators on application: (underline all CIDsCANN-associated investigators, if applicable)

CIDsCANN main contact(s)

Brief synopsis of proposal highlighting aspects, which involve Canadian Children IBD Network

Reason for CIDsCaNN Involvement: (circle all that apply)

Expertise

Inception Cohort Data

Biobanked Biospecimens from Inception cohort

Recruiting of new Patients for Proposed study Other:

Summary of biospecimens to be provided by CIDsCANN

Patient type:

Number of such patients

Timing of biospecimen collection:

Indicate Type and amount of each biospecimen at each time point

	<i>Amount required Timepoint 1:</i>	<i>Amount required Timepoint 2:</i>	<i>Amount required Timepoint 3:</i>
<i>Stool</i>			
<i>Urine</i>			
<i>DNA</i>			
<i>Biopsies</i>			
<i>Other</i>			

Summary of data required from above patients

Demographic data: eg. Age, gender, ethnicity

Phenotypic data: eg. Type of IBD, anatomic localization; current treatment

Questionnaire data: eg. FFQ; EQ

What access will Network researchers have to the results of the biospecimen testing and when?