



**LETTER OF INTENT
Submission Form**

Erdheim-Chester Disease Global Alliance

Title of LOI:	
Principal Investigator (PI) Name:	
PI Institution:	
Other Team Members from Your Institution:	
Names and Institutions of Collaborating Investigators from Other Institutions:	
Estimated Total Budget for Study: <i>(Note: Projected budget should be realistic.)</i>	
Estimated Budget Request for 1 Year: <i>(Note: If this is a 1 year study, the total budget amount and the budget request for 1 year will be equal.)</i>	
Proposed Sample Size: <i>(Note: If research will not involve patients, please enter a zero.)</i>	
Earliest date the study can begin:	
Will this study as a whole receive support from sources other than the ECD-GA (i.e., an institution, industry, foundations)?	
If yes, indicate the source of the funding:	
PI Signature:	Date:
PI Street Address:	
PI Country:	
PI Phone:	
PI Fax:	
PI E-mail:	
Please submit LOIs to the ECD Global Alliance via e-mail at: support@Erdheim-Chester.org	
Questions: Please email support@Erdheim-Chester.org.	

Rationale and Background: *(This section should provide the study rationale, supporting data and address the following: what is the goal of the study, why is this study important, any potential safety concerns, and how the study results might impact future treatments or research. The background information should be limited to what is relevant to the proposed study and should be presented succinctly but with sufficient detail to enable evaluation by the reviewers.)*

Hypotheses: *(Succinctly state the hypothesis for each primary and secondary objective.)*

Objectives: *(List primary and secondary objectives. Ensure that the study design allows for these objectives to be met.)*

Abbreviated Eligibility Criteria (if appropriate): *(Provide key inclusion criteria. These should include patient age, performance status, any limiting factors to inclusion, and permissible and required prior therapy.)*

Study Design: *(Succinctly describe the general study design. A schema or flow diagram may be used, if appropriate.)*

Treatment Plan (if appropriate): *(State the dose, method of administration, and schedule of each drug. State the duration of treatment, the duration of the study, and the duration of follow-up.)*

References: *(Provide references for cited data and key background/concepts. Verify all references.)*