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| **CLINICAL AND TRANSLATIONAL SCIENCE INSTITUTE**  **CTSI/AHW Goals Alignment** | | | | | | | | | | | |
| Please complete and upload this form to your application. | | | | | | | | | | | |
| **PROJECT TITLE *(maximum 100 characters, including spaces)*** | | | | | | | | | | | |
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| **PRINCIPAL INVESTIGATOR INFORMATION** | | | | | | | | | | | |
| MCW Principal Investigator: | | | | |  | | | | | | |
| Title: | |  | | | | | | | | | |
| Department: | | | |  | | | | | | | |
| Phone: | | | (   )   - | | | Email: | |  | | | |
|  | | | | | | |  | | | | |
| **AHW Five-Year Plan Emphasis Area** (please check all that apply): | | | | | | | | | | | |
| All projects supported by funding from the Advancing a Healthier Wisconsin for the CTSI Pilot and Collaborative Awards program are required to fit with one of the following AHW Five-Year Plan priorities. | | | | | | | | | | | |
|  | Cancer | | | | | |  | | Inflammation and Immunology | | |
|  | Cardiovascular Disease | | | | | |  | | Neuro-degenerative Diseases | | |
|  | Concussion and Traumatic Brain Injury | | | | | |  | | Population Health | | |
|  | Diabetes and Obesity | | | | | |  | | Regenerative Medicine | | |
|  | Genetics and Personalized Medicine | | | | | |  | | Other (specify): | | |  |
| By signing below, the Principal Investigator verifies that the information included on this form is complete and accurate to the best of his/her knowledge. | | | | | | | | | | | |
|  | | | | | | | | | |  |  |
| **MCW Principal Investigator’s Signature** | | | | | | | | | |  | **Date** |