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FIFTH ANNUAL BRAIN Initiative Investigators Meeting

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OMB# 0925-0740 Exp Date: 05/2019

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Fill out the information below, then click "Next" to proceed.

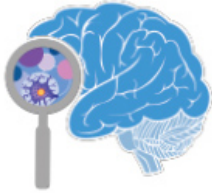
To return any previous page, use the "Previous" button at the bottom of the form and NOT your browser back button.

| | |
|--------------------------|----------------------|
| *First Name: | <input type="text"/> |
| *Last Name: | <input type="text"/> |
| *Email Address: | <input type="text"/> |
| *Re-enter Email Address: | <input type="text"/> |

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Personal Information

| | |
|---|----------------------|
| First Name: | <input type="text"/> |
| Last Name: | <input type="text"/> |
| Email Address: | <input type="text"/> |
| *Prefix: | <input type="text"/> |
| *Job Title: | <input type="text"/> |
| *Company/Organization/Institution Name: | <input type="text"/> |

Work Address:

| | |
|------------------|----------------------|
| Country: | <input type="text"/> |
| Address: | <input type="text"/> |
| City: | <input type="text"/> |
| State/Province: | <input type="text"/> |
| ZIP/Postal Code: | <input type="text"/> |
| Work Phone: | <input type="text"/> |

Would you like to be included on the participant list, which is posted on the event website?

Yes No

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Registration Questions

***Please indicate your gender:**

- Female
- Male
- Prefer not to answer
- Other

***Please indicate your race/ethnicity:**

- Black/African America
- Hispanic/Latino
- American Indian/Alaska Native
- Native Hawaiian/Pacific Islander
- Asian
- White/Caucasian
- Prefer not to answer

Please indicate if you have a disability e.g. a physical/mental impairment that substantially limits one or more major life activities:

- Yes No

***Pursuant to the Americans with Disabilities Act, do you require specific aids or services?**

- Yes No

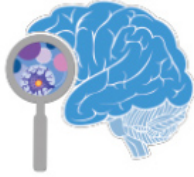
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Registration Questions

Your Attendance

***Please select your attendee type:**

- a. Scientist: I am a staff scientist and/or I have completed my post-doctoral training. I continue to perform experiments as a researcher on a federally-funded BRAIN project or BRAIN-related research project with another funding source.
- b. Trainee: I am a post-doctoral trainee or earlier stage in my education and I may perform research for a federally-funded BRAIN project or BRAIN-related research project with another funding source.
- c. Other

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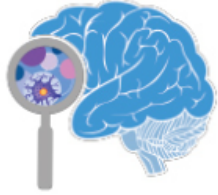
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Registration Questions

Your Research Field or Discipline

Had you worked in the field of Neuroscience prior to participating in the BRAIN Initiative?

- Yes
 No

Aside from Neuroscience, what would you currently consider to be your primary field of research?

- i. Biochemistry or Molecular and Cellular Biology
 ii. Bioinformatics, Statistics, or Applied Mathematics
 iii. Chemistry
 iv. Clinical Sciences
 v. Computational Biology
 vi. Computer Science
 vii. Engineering
 viii. Ethics, Philosophy, or Law
 ix. Genetics/Genomics
 x. Neuroimaging/Radiology
 xi. Physiology or Systems Biology
 xii. Physics
 xiii. Psychology or Behavioral Sciences
 Other (please specify):

Continued from previous page

Aside from Neuroscience, what would you currently consider to be your secondary field of research (if applicable)?

- i. Biochemistry or Molecular and Cellular Biology
- ii. Bioinformatics, Statistics, or Applied Mathematics
- iii. Chemistry
- iv. Clinical Sciences
- v. Computational Biology
- vi. Computer Science
- vii. Engineering
- viii. Ethics, Philosophy, or Law
- ix. Genetics/Genomics
- x. Neuroimaging/Radiology
- xi. Physiology or Systems Biology
- xii. Physics
- xiii. Psychology or Behavioral Sciences
- Other (please specify):

What kind of training, if any, have you provided to the scientific community (please select all that apply):

- a. None thus far.
- b. Giving advice to colleagues on a case-by-case basis.
- c. Temporarily hosting outside researchers in your lab to train them in techniques/tools your lab has developed.
- d. Creating online, open-access materials/tutorials/protocols for the community.
- e. Hosting or presenting workshops/training courses.
- Other training to those beyond your immediate lab:

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Registration Questions

Your Project Resources

We are interested in learning more about the resources that you have produced as a result of your BRAIN project(s). Please provide website URLs, a short title/description, and the specific BRAIN project for which the resource was developed by using the form below. These URLs may be added to the NIH BRAIN Initiative website to facilitate distribution among the research community.

Do you receive federal funding through the BRAIN Initiative?

Yes No

Please indicate the number of BRAIN projects with which you are affiliated. You will have the opportunity to provide information on each project:

- 1 project
 2 projects
 3 projects
 4 projects
 5 projects

i. Please select your funding source from the drop down:

ii. Please provide the project/grant number of your BRAIN project:

iii. Please provide the URL for any publicly available data (e.g. in a data repository):

iv. Please provide the URL for any available software:

v. Please provide the URL for any available training materials:

vi. Please provide the URL for any reagents/animals shared in a repository:

vii. Please provide the URL for any other associated resources:

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Registration is almost complete! All BRAIN Initiative projects must be represented by ONE (1) poster during the poster sessions, which requires ONE (1) associated abstract submission. Please note that BRAIN-funded F32 fellowship recipients are expected to submit an abstract and present a poster on their work as the Principle Investigator of the project.

Trainee Travel Award Eligibility: F32 fellowship recipients and recipients of BRAIN Diversity Supplements are not eligible for the travel award.

Note: If you are interested in submitting a Symposium proposal, Research Highlight Talk, Trainee Travel Award, or general poster abstract, you can access your registration record at any time and change the type of your submission or select another category for submission.

Submission deadlines:

- Symposia Submissions – November 30, 2018
- Research Highlight Talk Submissions – January 31, 2019
- Trainee Travel Award Submissions – January 31, 2019
- General Poster Abstract Submissions – March 11, 2019

NINDS Participant

I would like to complete a symposium proposal and I am prepared to be the (co-) organizer of this symposium if it is selected.

I would like to complete the abstract submission on behalf of (one of) my BRAIN Initiative project, and I DO want it to be considered for a Research Highlight Talk or Trainee Travel Award. Note: Trainees are expected to submit their own abstract that relates to a broader BRAIN Initiative project. Trainee abstracts do NOT supplant the overall project abstract or poster. Eligible trainees cannot have advanced beyond the postdoctoral stage of their education.

I would like to complete the abstract submission on behalf of (one of) my BRAIN Initiative project, but we do NOT want this abstract to be considered for a Research Highlight Talk or Trainee Travel Award.

NO, I will NOT be completing the abstract submission process.

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Answer the questions below and then click Next.

NINDS Participant

I would like to complete the abstract submission on behalf of (one of) my BRAIN Initiative project, but we do NOT want this abstract to be considered for a Research Highlight Talk or Trainee Travel Award.

Because you will be completing the submission process, you will receive two (2) emails, once you have completed this registration process.

- 1. Your Official Registration Confirmation.**
- 2. Your link to the Submission System.**

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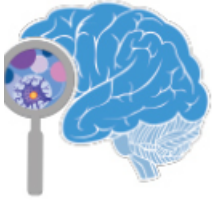
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our registration is not yet complete. This page displays a summary of your registration. You may edit this information by clicking the "edit" link next to your name. When you have completed reviewing/editing your information, please click Finish.

Review Your Information Before Submitting

NINDS Participant

Cancel

Add Person

Finish

NINDS Participant [\(Edit\)](#)

Email Address:

ParticipantReg@test1.com

Prefix:

Mr.

Job Title:

Head Tester

Company/Organization/Institution Name:

Event Team

Work Phone:

Work Address:

USA

Cancel

Add Person

Finish

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2019 BRAIN Initiative® Investigators Meeting Symposium Submission System

OMB# 0925-0740 Exp Date: 05/2019

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Final Abstract Submission Deadline: November 30, 2018

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Symposia Criteria

- Symposia are 90-minutes in duration.
- Sessions should start with a 5-minute introduction of the session's topic/speakers and end with 5-minutes for closing remarks and/or additional Q/A.
- The Session Organizer(s) should indicate session format in their "Overall Objective" response. This includes information like the number of speakers, anticipated duration of individual presentations, use of a panel, timing of audience Q/A etc.
- Session Organizer(s) should review the sessions from the past 2 meetings (April 2018 and December 2016, PDF provided) and try to avoid redundancy in their submission.
- Proposals may NOT contain images, graphics, and/or figures.
- Symposia proposals are limited to 2200 characters or less (including spaces).
- Symposia proposals are to be pasted as plain text into a text box.

Investigators are expected to submit ONE corresponding abstract for EACH federally-funded project.

IMPORTANT SUBMISSION DEADLINE

Consideration for Symposium Acceptance: **November 30, 2018**

BEFORE YOU CONTINUE

You will want to make sure you have the following information:

1. Names of up to TWO (2) session organizers.
2. The title of the symposium session.
3. The overall objective(s) of the symposium session (max 1500 characters).
4. A justification of the timeliness of this symposium session (max 500 characters).
5. A BRIEF description for use in the meeting program (max 500 characters).
6. Indication of whether the session includes areas and/or topics relating to the ethical implications of BRAIN-supported emerging neurotechnologies and advancements and their applications.
7. Request for assistance from the 2019 PI Meeting Program Committee and/or federal program staff in identifying additional speakers. **Note: The Program Committee may provide alternate speaker suggestions following consideration of the overall meeting program.**
8. Diversity Statement Acknowledgement (max 500 characters, as needed):
 - a. *In my speaker list, have I included representation of women, minorities, and/or persons with disabilities?*
 - b. *If no appropriate representation is included, can I think of another potential speaker(s) to invite (with equivalent qualifications), whose participation would improve diversity inclusion?*
 - c. *If not, why? Is this an area where we need to plan/perform additional outreach?*
9. The names of suggested moderators/speakers for this session. **Note:** To further enhance panel diversity, please consider career stage, and discipline. Moderators/speakers do NOT need to receive federal BRAIN Initiative funding to participate.

Please note, you will be able to submit multiple abstracts.

First time submitters will need to create an account. After clicking on the "Submit Symposia" button below, select the "Need to create an account?" link below the Log-in button.

[Submit Symposia](#)

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2019 BRAIN Initiative® Investigators Meeting Symposium Submission System

Diversity Statement: A growing body of [research](#) focused on the benefits of diversity shows that teams comprised of people from a variety of backgrounds and experiences produce better and more innovative products and ideas than a homogenous team. The National Institutes of Health, along with the other federal and non-federal organizations participating in the U.S. BRAIN Initiative, recognizes the benefits of a diverse workforce on scientific discovery, with a particular focus on enhancing the pool of individuals from backgrounds underrepresented in biomedical research. Accordingly, we seek to nurture appropriate representation of women, under-represented minorities, and/or persons with disabilities as poster presenters and invited speakers in relation to their participation in the annual BRAIN Initiative Investigators Meeting.

Step 1: Enter the Author's Details

First Name

Last Name

Email Address

Cancel

Save

Next

Save & Continue

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2019 BRAIN Initiative® Investigators Meeting Symposium Submission System

Step 2: Submission and Speaker Information

QUESTION 1. Please provide the names of up to TWO (2) session organizers:

* Session Organizer #1

Session Organizer #2

* 2. Please provide the title of the symposium session:

Continued from previous page

* 3. Please provide the overall objective(s) of the symposium session (max 1500 characters):

1,500 characters remaining

* 4. Please justify the timeliness of this symposium session (max 500 characters):

500 characters remaining

* 5. Please provide a BRIEF description for use in the meeting program (max 500 characters):

500 characters remaining

6. This session includes areas and/or topics relating to the ethical implications of BRAIN-supported emerging neurotechnologies and advancements and their applications.

- Yes
- No

7. I would appreciate assistance from the 2019 PI Meeting Program Committee and/or federal program staff in identifying additional speakers. Note: The Program Committee may provide alternate speaker suggestions following consideration of the overall meeting program.

- Yes
- No

8. Diversity Statement Acknowledgement (max 500 characters, as needed):

** a. In my speaker list, have I included representation of women, minorities, and/or persons with disabilities?*

- Yes
- No

b. If no appropriate representation is included, can I think of another potential speaker(s) to invite (with equivalent qualifications), whose participation would improve diversity inclusion?

500 characters remaining

c. If not, why? Is this an area where we need to plan/perform additional outreach?

500 characters remaining

9. Please provide the names of suggested moderators/speakers for this session. **Note:** To further enhance panel diversity, please consider career stage, discipline, and geographical location. Moderators/speakers do NOT need to receive federal BRAIN Initiative funding to participate:

* First Name

* Last Name

* Email Address

[Remove Speaker](#)

Add Speaker

Previous

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Continued from previous page (showing addition of a speaker)

9. Please provide the names of suggested moderators/speakers for this session. **Note:** To further enhance panel diversity, please consider career stage, discipline, and geographical location. Moderators/speakers do NOT need to receive federal BRAIN Initiative funding to participate:

* First Name

* Last Name

* Email Address

[Remove Speaker](#)

* First Name

* Last Name

* Email Address

[Remove Speaker](#)

Add Speaker

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Step 3: Review Your Submission

This is how your submission summary will appear to submitting authors. You can use the styling options to make the labels and values look exactly how you want.

Please note the labels and values shown here are examples, not what you actually selected.

Author Details

First Name

ExampleFirstName

Edit

Last Name

ExampleLastName

Email Address

ExampleEmailAddress@email.com

Previous

Cancel

Save

Submit

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2019 BRAIN Initiative® Investigators Meeting Symposium Submission System

Congratulations!
You have successfully completed your submission.

If you are interested in submitting a Research Highlight Talk Abstract, [Click Here](#).

If you are interested in submitting a General Poster Abstract, [Click Here](#).

To enter additional Symposium submissions, select "MY SUBMISSIONS" below and then "SUBMIT
ABSTRACT"

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