

BRAVE FY25 FINAL APPLICATION QUESTIONS

Complete the question below in Wellspring Sophia located at the link below

https://va.wellspringsoftware.net/kms/onlinesubmissions/submissionform/?survey_id=14

1. Project Information

a. PI Name and Email

Full Name*

Email Address*

b. Project Title*

c. Start Date *

d. End Date (The project end date must be before September 30, 2025)*

e. Total funds requested * \$

f. VA Medical Center Name*

g. VA Station Number *

2. Project Abstract

Please provide a brief lay description of your project (need, solution, project cost). Indicate the date of consult with TTS.(250 words)*

3. Intellectual Property

a. Title of the Invention Disclosure(s)*

b. VA Technology Invention Disclosure Number (format 20xx-xxx)*

c. Is there any existing license, option to license, or any other agreement (e.g. sponsored research agreement, CDA/NDA, MTA) related to this technology? (Discuss with your University Affiliate (if applicable) and VA Tech Transfer Specialist to confirm)* **Yes/No**

If yes, please provide an explanation and details.

4. Current Technology Readiness Level

a. How will this proposal enhance the technology readiness level (TRL) of the innovation? (Limit to 200 words)*

b. What TRL will the invention be at after completion of the proposed project? Provide number*

5. Background, Significance, Unmet Veteran or civilian Need and Solution

a. Please provide the reviewers with a summary understanding of the problem to be solved and/or the quality-of-life issue to be addressed (Limit to approx. 100 words)*

b. Please provide a summary of the standard of care and/or currently available solutions (Limit to approx. 100 words)*

- c. Please provide a description of your technological solution and the current state of your research thus far completed. What has been done, if anything, to test this technology. (Limit to approx. 250 words)*
- d. Please describe the population that this technology would serve. Please provide information about the number of potential patients that could be impacted and the type of patient (veteran, general population, etc.) (Limit to approx. 100 words)*

6. BRAVE Study Selection and Goals: (TTP recommends focusing on a single, short-term, aim/objective/outcome and a technical approach aligned with the intent of the BRAVE funding program.)

- a. Please provide a lay description of the study or experiment set to be performed using BRAVE funds. (Limit to approx. 350 words)*
- b. Explain why this study or experiment set was selected and how it may advance the technology along the commercialization journey. Studies or experiments that lead to a "pursue, pivot, or pause" decision are encouraged. (Limit to approx. 350 words) *

7. Risk

Describe the technical risk, decision points, and risk mitigation efforts in executing the technical plan and achieving the desired goals. This includes the likelihood that the proposed study will answer the commercial question, the risk to patients (if applicable), etc. (Limit to approx. 200 words) *

8. Proposed Budget Justification and Timeline

- a. Attach an itemized budget including an explanation/justification for each line item. Use the Budget template provided in Appendix A in the RFA and attach it as a PDF file.*

[Add Attachment](#)

- b. Attach a detailed project timeline, including milestones, planned reviews, and estimated completion date. Gantt-style charts are encouraged. Upload as a PDF file. *

[Add Attachment](#)

- c. If the proposal requests more than \$100,000, or with timelines exceeding 1 year, provide a compelling narrative justifying the timeline or funds. Budgets will be reviewed to ensure the costs are commensurate with the project aims and outcome. For example, if a prototype cost is \$25,000, then that amount should be requested. Budget feasibility will be part of the review process.

9. Potential Commercial Partners

- a. Include 2-3 potential licensees for this technology.*
- b. has there been any feedback from a company or grant reviewer related to the commercial development of this technology? * [Yes/No](#)

If Yes, Please provide a summary of the feedback. Describe the feedback received and how it will be incorporated into this project if funded. (Limit to approx. 250 words)

Letters of interest from potential licensees (written on company letterhead) may be attached to your application here. (Not required, but may be helpful.)