Neuroscience fMRI Study Proposal Submission Form

| Study Title | |
|---|--|
| | |
| Principal Investigator Name | |
| | |
| Principal Investigator Email | |
| | |
| Institution / Department | |
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| To are Morelous | |
| Team Members | |
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| Ctrudy December | |
| Study Description Aims & Objectives | |
| 7 time to explosives | |
| | |
| Methods & Experimental Design | |
| Motiodo d Exponinoniai Boolgii | |
| | |
| Participant Information | |
| 1 and part information | |
| | |
| Inclusion/Exclusion Criteria | |
| III CIUSIOI VEXCIUSIOII CITIEITA | |
| | |
| | |
| fMRI Information | |
| Scan Type(s) Required | |
| | |
| Estimated Scan Duration (per participant) | |
| | |
| | |

Number of fMRI Sessions

| Brief Analysis Plan | |
|------------------------|--|
| | |
| Timeline and Funding | |
| Timeline and Funding | |
| Proposed Start Date | |
| Funding Source/Status | |
| | |
| Ethics Approval Status | |
| | |
| | |
| Additional Information | |
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