

Neuroscience fMRI Study Proposal Submission Form

Study Title

Principal Investigator Name

Principal Investigator Email

Institution / Department

Team Members

Study Description

Aims & Objectives

Methods & Experimental Design

Participant Information

Inclusion/Exclusion Criteria

fMRI Information

Scan Type(s) Required

Estimated Scan Duration (per participant)

Number of fMRI Sessions

Brief Analysis Plan

Timeline and Funding

Proposed Start Date

Funding Source/Status

Ethics Approval Status

Additional Information