

# mHealth Letter of Intent Application

## 1. Letter of Intent: Contact Information

The Center for Technology and Aging is pleased to announce its Mobile Health (mHealth) Diffusion Grants Program. Through this grant program we will fund projects that focus on the adoption and diffusion of mobile health technology-enabled services to improve the health of older adults, while reducing the burden on clinicians and caregivers. As many as six one-year grants will be awarded for up to \$100,000 each from the \$500,000 grant program. Funded projects are expected to commence in August 2011. Letters of Intent must not exceed 11,000 characters including spaces (approximately 3 pages). Letters of Intent are due by 4pm PT, April 5, 2011.

If you use Word or a similar program to compose your answers, use plain text format. Special formatting will not stay intact.

If you must stop halfway through the application process, make sure your computer has cookies enabled. To enable cookies, see: <http://www.google.com/support/websearch/bin/answer.py?hl=en&answer=35851>.

After you have submitted all requested information on each page, press the [Next] button at the bottom of each page. Responses are saved by page, not by the specific question. When you have completed all four pages, press the [Done] button at the end of the survey to save all of your answers.

To re-access the application, click on the application link off of the Center's website.

The same computer must be used to access saved application information.

Submit questions to [vsteinmetz@techandaging.org](mailto:vsteinmetz@techandaging.org).

### 1. Please enter your Organization's Contact Information

Organization Name:   
Address:   
Address 2:   
City/Town:   
State:   
ZIP/Postal Code:

### 2. Please fill in the Contact Person's Information

Contact Person:   
Title:   
Address:   
Address 2:   
City/Town:   
State:   
ZIP/Postal Code:   
Email Address:   
Phone Number:

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## 2. Letter of Intent: Organization Information

### Background Information on Organization

**3. Is your organization tax-exempt under Section 501(c)(3) of the Internal Revenue code or a Local, State and/or Federal government agency?**

Yes

No

**4. Does your organization have the fiscal capacity to manage the funds and meet a start date of August 1, 2011?**

Yes

No

**5. Does your organization have prior experience with the mHealth technology that will be used in the proposed initiative?**

Yes

No

**6. If you were awarded a grant, would your organization be willing to share and disseminate program outcomes with the Center, as well as other grantees, service providers and technology vendors?**

Yes

No

## 3. Letter of Intent: Narrative

Please do not submit Letters of Intent longer than 3 pages (about 11,000 characters including spaces).

Please submit plain text format only. Special formatting will not stay intact. Please include line breaks for each category.

**7. Please copy your completed letter of intent into the space below**

