

## **PBTF RESEARCH PROGRAM**

# **Applicant FAQ: 2026–2030 Request for Proposals**

*Idea • Impact • Innovation Awards*

This FAQ is intended to help prospective applicants understand PBTF's 2026–2030 research strategy, eligibility, required application components, review process, and data-sharing expectations. It should be read alongside the RFP, the PBTF Research Program Guide, and the accompanying Appendix A (Data Sharing & Repository Guide) and Appendix B (Data Modality Quick Reference).

## **About the 2026–2030 Strategy**

### **Q: What is changing about how PBTF funds research starting in 2026?**

A: Beginning in 2026, PBTF is shifting from funding individual, standalone projects to strategically building the shared data and analytic infrastructure that unlocks better outcomes for children with brain tumors. Every funded project must contribute to and draw from a shared, harmonized data ecosystem. Proposals without a clear data strategy will not be funded.

### **Q: What are the three research pillars for FY 2026-2027?**

A: Precision Medicine & Diagnostics; Effective Therapies; and Survivorship. These pillars rest on a foundational layer of data/infrastructure and an enabling layer of AI and data, which apply across all pillars and award levels.

### **Q: What does 'data-first' mean in practice for my application?**

A: Every proposal, regardless of pillar or award level, must show how it leverages existing data resources and/or contributes structured, high-quality data back to the shared ecosystem. This includes a data contribution & deposit plan, a data usage & mining strategy, and where applicable an AI/ML integration plan, as described in Required Application Components.

## **Eligibility**

### **Q: Who can serve as Principal Investigator?**

A: Principal Investigators at academic, medical, or research institutions in the U.S. and internationally are eligible. Career-stage requirements vary by mechanism, and early-career investigators are encouraged to apply.

### **Q: Can industry partners be involved in a proposal?**

A: Yes. Industry partnerships are permitted and encouraged when they demonstrably accelerate translation, but industry may not serve as the prime applicant.

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**Q: Does prior PBTF funding help or hurt my chances?**

A: Neither. PBTF maintains a tumor-, institution-, and researcher-agnostic posture, so prior PBTF funding neither advantages nor disadvantages an application.

**Q: What if my planned participant consent doesn't support broad data sharing?**

A: Applicants proposing to generate patient-derived data must confirm at the Letter of Intent (LOI) stage that existing or planned participant consent permits broad data sharing under a General Research Use (GRU) framework, without Data Use Limitations (DULs) that would restrict data sharing, integration, or future research use. At the LOI stage, this confirmation may be provided as a written attestation; the fully executed Institutional Certification is not required until full proposal submission or, at the latest, prior to award. Projects that cannot meet this requirement may not advance to the full proposal stage unless a clear justification is provided and an alternative data-sharing plan is approved by PBTF.

**Q: When is Institutional Certification required, and who completes it?**

A: Institutional Certification is generally required for projects involving controlled-access human genomic data. It is typically completed through the investigator's Institutional Review Board (IRB) or institutional signing official, and confirms that participant consent, privacy protections, and data governance are consistent with the NIH Genomic Data Sharing Policy. Many institutions already complete similar certifications for NIH programs such as Gabriella Miller Kids First and dbGaP. Applicants without prior experience are encouraged to work with their institutional research administration or IRB office early in the application process. Note: the fully executed certification is not required at the LOI stage; applicants need only attest at LOI that their consent and institutional processes will support this requirement. The executed certification itself must be completed before funding is released, typically by full proposal submission or, at the latest, prior to award.

## **Award Levels & Mechanisms**

**Q: What are the three award levels, and how do they differ?**

A: Idea Awards (\$150K / 1 year) support high-risk, high-reward translational ideas with a clear pathway to clinical impact, best suited for early-stage investigators or bold new directions. Impact Awards (\$300K total / over 2 years) support advanced analysis of existing data advancing toward preclinical or clinical translation where applicable, and require a patient-outcome validation plan, best suited for established teams with preliminary data. Innovation Awards (\$600K total / over 3 years) support multi-investigator, cross-institutional programs addressing a major unmet translational challenge, best suited for multi-site consortia. All three levels draw on the same three research pillars and require a data contribution & deposit plan and AI/ML integration plan. Mechanism-specific page limits, additional requirements, and review-criteria weightings are defined in the Idea/Impact/Innovation Mechanism One-Pagers.

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**Q: How do I know which award level to apply for?**

A: Applicants self-identify the level that best matches the maturity of their science, see the Stage and Best Fit For descriptions in the RFP's Award Levels table.

**Q: Where do I find the current scientific priorities and mechanism-specific rules?**

A: For mechanism-specific rules (page limits, additional requirements, review weightings), see the Idea/Impact/Innovation Mechanism One-Pagers. For current scientific priorities, refer to the RFP document.

## **Required Application Components**

**Q: What must every application include, regardless of award level?**

A: Several components are required of every application, plus one that applies only to Idea Award applicants: a translational pathway statement describing how the work moves from discovery toward clinical impact; a data contribution & deposit plan; a research resource & data use strategy; a technology (AI/ML) integration plan; a Human Subjects & Vertebrate Animals Compliance Statement (current IRB/IACUC status, or "Not Applicable"); a Bridge to next funding plan describing how a successful outcome positions the work for the next PBTF award mechanism, external follow-on funding, or an industry partnership; and a Team & Equity Statement addressing team credibility, timeline confidence, and reach across tumor types and underserved populations. Idea Award applicants must also include a Risk articulation statement identifying the highest-risk assumption and what a negative result would teach the field.

**Q: What is a Data Contribution & Deposit Plan?**

A: It describes the data types to be generated, the proposed repository strategy (e.g., CBTN, dbGaP, or other appropriate repositories), how the data will meet CBTN integration standards where applicable, and the proposed timeline for deposition, sharing, and integration.

**Q: What is a Data Usage & Mining Strategy?**

A: It describes which existing CBTN, CCDI, or other relevant data resources the project will leverage, and how, including the rationale for generating new data where appropriate.

## **Review Process & Timeline**

**Q: What criteria are proposals scored against?**

A: All proposals are scored against five criteria: Scientific Significance, Rigor & Translational Pathway, Data Strategy & Harmonization, AI/ML Integration, and Team, Governance & Equity. Mechanism-specific weightings for these criteria are defined in the Mechanism One-Pagers.

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**Q: Who reviews and approves applications?**

A: Applications are reviewed by the Research Advisory Network (RAN) and the data and technology component is reviewed by the Technology Advisory Network (TAN), with selections made by the Research Advisory Committee (RAC) from RAN recommendations, and final approval from the PBTF Executive Committee and Board.

**Q: What is the timeline for the 2026–2030 cycle?**

A: Aug. 18, 2026: Topic-Specific Calls released; LOIs open.

Sept. 18, 2026: LOIs due.

Nov. 1, 2026: Invited applicants notified.

Jan. 12, 2027: Full proposals due.

Jan.–Mar. 2027: Scientific peer review (applicants may be contacted with reviewer questions).

Apr. 26, 2027: Funding decisions communicated.

May 30, 2027: Award agreements finalized and recipients publicly announced.

June 1, 2027: Funding begins.

Overall, PBTF's grant cycle runs from August through June, spanning approximately 9 months from strategy development to award announcement, though timelines can be accelerated when opportunities, funding, and leadership alignment allow.

## **Data Sharing, Repositories & CBTN**

**Q: Do I need to use existing data in my project?**

A: Applicants are expected to consider and, where appropriate, leverage existing federated data resources and/ or CBTN before generating new data. Applications should clearly describe how existing resources were evaluated and, when applicable, the rationale for generating additional datasets.

**Q: Do all projects need to deposit data into CBTN, dbGaP, PNOC, and PCDC?**

A: Not necessarily. Repository strategy depends on the type of data generated, participant consent, funding requirements, and applicable repository policies. Individual-level human genomic and other controlled-access data typically go to NIH-approved repositories such as dbGaP, while harmonized clinical, molecular, imaging, and biospecimen data are typically integrated within CBTN, PNOC, or PCDC, depending on the originating database. Applicants should describe their proposed repository strategy in the PBTF LOI Data Info form at the LOI stage and PBTF Data Use & Sharing Form at the full proposal stage.

**Q: What is considered a 'research-ready' dataset?**

A: A research-ready dataset is complete (includes raw and primary processed data), interpretable (includes sample-level context, metadata, and clear variable definitions), and documented & QC'd (includes quality-control metrics and a description of how data were generated and processed). Rule of thumb: if another qualified investigator could understand and reuse the dataset without contacting the originating lab, it is likely ready for integration. Full minimum data-package requirements by modality are in Appendix A and Appendix B.

**Q: Can I include data-sharing and repository-preparation costs in my budget?**

A: Yes. PBTF recognizes that preparing research-ready datasets requires dedicated expertise and resources. Applicants are encouraged to budget for activities such as data preparation, harmonization, metadata creation, quality control, documentation, repository submission, data governance, and bioinformatics support, when needed.

**Q: What if my institution lacks the infrastructure or expertise to prepare research-ready data?**

A: Applicants should identify these needs during proposal development. Where additional preparation, harmonization, quality control, repository submission, or data governance activities are required, those efforts should be described in the application and included in the proposed budget. PBTF may consult CBTN, where appropriate, to help define the scope of work and associated resources needed to support these activities.

**Q: What if participant consent includes data use restrictions (DULs)?**

A: Review participant consent and any applicable Data Use Limitations before submitting an application. Projects that cannot support the required level of data sharing may not be eligible for PBTF funding.

**Q: When is Institutional Certification required?**

A: Projects involving controlled-access human genomic data generally require Institutional Certification confirming that participant consent and institutional oversight support the proposed data sharing. Applicants should confirm that their institutional consent language supports broad data sharing early in the application process. As with the LOI-stage consent confirmation above, only a written attestation is required at LOI; the executed certification itself is due before funding is released, no later than full proposal submission or award.

**Q: What support is available to help me access CBTN data or prepare a competitive application?**

A: CBTN offers Getting Started sessions (first Tuesday of each month, 10:00 a.m. ET), Advanced Q&A sessions for active projects (third Thursday of each month, 2:00 p.m. ET), monthly drop-in office hours, and self-guided resources through the Kids First Data Resource Portal and CBTN Quick Start Videos. PBTF and CBTN may also offer pre-application webinars on the four project data scenarios, data sharing and deposit requirements, accessing existing CBTN resources, and developing a strong Data Contribution & Deposit Plan. Eligible investigators may also use the NIH Cloud Credit Program to help offset cloud computing costs.

**Q: Who do I contact with questions about data sharing, CBTN resources, or technical assistance?**

A: Questions about data-sharing expectations, repository planning, or CBTN integration may be directed to the PBTF program team during the application process. Questions about CBTN data resources, investigator support, or technical assistance may be directed to [research@cbtn.org](mailto:research@cbtn.org) and [research@curethekids.org](mailto:research@curethekids.org).

## **Submitting Your Application**

**Q: Where do I send my Letter of Intent, and who do I contact with general questions?**

A: All applications, including Letters of Intent (LOIs) and invited Full Proposals, must be submitted through ProposalCentral.

Program and RFP Inquiries: Misha Mehta, PhD, Senior Director of Research, PBTF, [mmehta@curethekids.org](mailto:mmehta@curethekids.org)

**Q: What happens if I'm invited to submit a full proposal?**

A: Applicants invited to submit a full proposal are notified on Nov. 1, 2026, with full proposals due Jan. 12, 2027. Scientific peer review follows from January through March 2027, and applicants may be contacted during this period to address reviewer questions or provide additional information.