**2025 CwD-JENIOUS Research Project Proposal**

**Children with Diabetes** and the **JENIOUS Leadership team** are glad to announce the call for the **JENIOUS-CwD Award** with the motto “*care today, expecting a cure tomorrow*”*.*

*All relevant questions must be answered for this form to be complete (preferably filled electronically; in case of handwriting, use capitals).*

**CONTACT AND GENERAL INFORMATION**

* 1. **Name and surname of the proposal’s author:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. **Profession: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	3. **Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	4. **Contact Information:**
* **E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Phone (with country and area code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	1. **Are You an ISPAD member?** ( ) Yes ( ) No
	2. **Are You a JENIOUS member?** ( ) Yes ( ) No

**PROPOSED PROJECT**

*The following should not exceed 300-350 words.*

* 1. **Title:**
	2. **Brief Background:**
	3. **Objective:**
	4. **Methods:**
	5. **Feasibility:**
	6. **Expected Results** (indicate how your project will improve pediatric diabetes care)
	7. **Costs** (indicate any expenses related to the project execution and sources for funding).
	8. **Timeline:**