Tina's Wish®
For the Early Detection of Ovarian Cancer
Know Early. Know Hope.®

Acceleration to Clinic
From Lab to Clinic, Faster

Letter of Intent
The Honorable Tina Brozman Foundation for Ovarian Cancer Research
Acceleration to Clinic Grant
2027-2028

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About Tina's Wish

The Honorable Tina Brozman Foundation for Ovarian Cancer Research (Tina's Wish) is an ovarian cancer non-profit organization dedicated to funding groundbreaking scientific research for the early detection and prevention of ovarian cancer. At Tina's Wish, we believe that the most effective way to fight ovarian cancer is to diagnose it at its earliest, most curable stage or to prevent it from ever developing.

Tina's Wish was founded in 2007 in memory of the Honorable Tina Brozman, former chief judge of the SDNY Bankruptcy Court, who died two years after she was diagnosed – too late – with ovarian cancer. Tina was not angry that she had the disease, she was angry that she did not know sooner.

Since its inception, the Foundation has raised over $34 million for its cause. Annually, Tina's Wish now funds $2.4 million of scientific research for the early detection and prevention of ovarian cancer at 15 world class institutions. To date, we have funded Rising Star and Team Science Grants. Click here to learn more about these grant opportunities.

We are accelerating the pace of progress towards saving women's lives. Together, we can make Tina Brozman's wish to discover an effective early detection method for ovarian cancer a reality.

For more information, visit our website at tinaswish.org

Purpose

The Honorable Tina Brozman Foundation ("Tina's Wish") is announcing the launch of a new program, the Acceleration to Clinic ("A2C") Grant. The A2C Grant is designed to provide integrated grant funding coupled with expert advisory resources to investigator teams whose biomarkers have achieved a defined level of clinical readiness as measured by the National Cancer Institute's Early Detection Research Network (EDRN) five-phase biomarker development framework. These advisory resources are intended to strengthen translational decision-making, de-risk development pathways, and better position projects for successful clinical advancement and external funding.

Program Objectives

The A2C Grant is committed to accelerating the translation of promising diagnostic and prognostic biomarkers into clinical practice. The A2C Grant seeks to:

- Fund rigorous, milestone-driven biomarker validation projects that are poised for clinical translation.
- Support investigators designing investigator-initiated clinical trials (IITs) during the grant period.
- Provide structured advisory consultations in IP/legal strategy, clinical trial design, biostatistical analysis, FDA regulatory filing, product development, finance, and incorporation of the patient voice selected by the applicant based on project needs.
- Ensure progress to clinical translation within one year following the close of the grant period.

Scope

The grant is open to biomarkers in the following areas (not exhaustive):

- Early detection and screening tests
- Ovarian cancer interception strategies including but not limited to the strategic identification that could lead to the disruption of disease during the critical interval between molecular initiation and clinical emergence, encompassing, but not restricted to molecular, genomic, and imaging tools to detect and disrupt disease in its preclinical evolution before irreversible progression renders curative intervention unlikely.
- Multi-analyte and composite biomarker signatures (protein, genomic, epigenomic, metabolomic, or imaging-based)

Selection Process and Timeline

1. Tina's Wish Scientific Advisory Board will review LOIs and full proposals according to the NIH recognized peer-review process; additional reviewers may be used as needed.
2. Feedback for LOI will not be provided to applicants.
3. Successful LOI submissions will be invited to submit full proposals.

LOI Due Date	September 9, 2026
Full Application Invitation	October 26, 2026
Full Application Due Date	December 15, 2026
Finalist Presentation	March 29, 2027 (Tentative)
Notification	April 5, 2027
Award Start Date	July 1, 2027

Program Structure

The A2C Grant is a two-year funded grant designed to position awarded projects to progress towards clinical translation within one year of grant close. The A2C grant application process is structured in two competitive phases:

1. **Letter of Intent (LOI):** A brief, non-binding submission reviewed for eligibility and scientific merit by the Organization's scientific advisory board. Selected applicants will be invited to submit full applications.
2. **Full Application**: A comprehensive proposal reviewed by an external scientific panel and the Organization's scientific advisory board.

Awards are subject to milestone-based release of funds, with formal reviews at the end of Year 1.

Budget

The requested budget should be in proportion with the scope of the proposed project and should not exceed $1,000,000 in total costs over two (2) years. A maximum of $500,000 in total costs may be requested per year.

Budget Restrictions

- Indirect costs of up to 10% can be requested over two (2) years.
- Up to 10% of total grant funds may be requested to be used towards significant equipment purchase.

Eligibility Requirements

Applications will be evaluated for eligibility prior to scientific review. **For questions regarding eligibility please contact Vidya Ganapathy** (vganapathy@tinaswish.org). The following requirements must be met in full:

Institutional Eligibility: Applicants must be working in a school of medicine or public health or a recognized non-profit scientific research facility in the United States.

Applicant Eligibility:

i. Applicants must have attained the faculty position of Assistant Professor or higher (or equivalent).
ii. Applicants may serve as PI or Co-PI on only one application.
iii. Researchers can be *Resource Collaborators* (An individual or institution that contributes essential materials, specimens, data access, or infrastructure to the proposed project but does not hold intellectual or scientific leadership responsibility for the research aims) on more than one application.
iv. Researchers providing intellectual or scientific input to the project without primary responsibility for a specific aim may be listed as *Scientific Collaborators* and may appear on multiple A2C applications, provided their effort does not exceed 5% on any single application. They should provide 2-3 sentence justification for their role in the project.

Scientific Eligibility/Translational Readiness: All eligible projects must satisfy the following translational readiness criteria. These criteria reflect the minimum evidence base required for meaningful clinical acceleration within the A2C funding period:

i. Projects **must have a validated analytical assay with documented performance characteristics** (sensitivity, specificity, limit of detection, positive and negative predictive values); At least one peer-reviewed or preprint publication, or internal validated study report, demonstrating clinical assay performance in human samples.
ii. Projects **must have preliminary estimates of sensitivity and specificity** in a relevant clinical population (retrospective case-control acceptable).
iii. Projects **must demonstrate a clear translational intent**, with preliminary data and a defined pathway toward an outlined clinical trial design for the proposed prospective validation study.
iv. Projects **must reflect a collaborative scientific approach**; priority consideration will be given to projects that demonstrate meaningful collaboration among two or more researchers across institutions, disciplines, or functional areas of expertise.
v. Projects **must be innovative and focused on early detection or interception** of ovarian cancer. We define ovarian cancer interception as the strategic identification that could lead to the disruption of disease during the critical interval between molecular initiation and clinical emergence. The focus will be on the deployment of molecular, genomic, and imaging tools to detect and disrupt disease during its preclinical evolution before irreversible progression renders curative intervention impossible.
vi. The application **should demonstrate the availability of and access to a suitable patient population** that will support a meaningful outcome for the study.

The following projects are **ineligible**:

1. Projects where the primary activity is biomarker discovery rather than clinical validation.

2. Projects proposing drug development, therapeutic interventions, or vaccine development as primary activities.
3. Requests to support the continuation of existing trial activities or address funding shortfalls are not eligible.
4. Projects that address recurrence or late-stage disease detection are not eligible.

Application Instructions

Formatting Instructions

- All materials must be submitted as a single PDF file.
- The font to be used is Arial Helvetica, Palatino Linotype, or Georgia, 11 pt minimum for body text.
- Margins: 0.5 inches on all sides (minimum); Line spacing: Single-spaced (1.0)
- Headers and page numbers are required; the name of the principal investigator should appear in the upper right-hand corner of each page.
- Appendices are not allowed.

Submission Instructions

Details to follow soon! Tina's Wish is migrating to a new portal for grant application submissions. In the meantime, we encourage researchers to prepare materials in anticipation of our portal launch. Once the grant application portal is live, Tina's Wish will send an email announcement and update the Submission Instructions here.

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Application Components

All applicants must provide the following in both the LOI and Full Application:

- A half-page EDRN Phase Documentation Summary explicitly stating the current phase and the evidence supporting that assessment.
- The EDRN phases are summarized in the table below, along with their eligibility status for the A2C Program:

Phase	EDRN Phase Name	Typical Characteristics	Program Eligibility
Phase 1	Preclinical Exploratory	Candidate biomarker(s) identified through discovery work; assay development and optimization ongoing; no standardized clinical performance data in human specimens	Not eligible
Phase 2	Clinical Assay Development & Validation	Assay fully validated to CLIA-equivalent standards; retrospective clinical performance data in banked human specimens; preliminary sensitivity/specificity estimates from case-control or nested study designs	**Eligible (if completed) ✓**

Phase 3	Retrospective Longitudinal Repository Studies	Archived specimens: sensitivity/specificity established	**Eligible ✓**
Phase 4	Prospective Screening Studies	Prospective cohort underway	**Eligible ✓**

LOI Section Description

All sections should be compiled as one pdf and submitted. Format Instructions should be followed as described above.

1. **Cover Page**: Should include Name of Institution, PI & Co-PI Names(s), Position/Title. Title of Proposal. Please follow the template provided.
2. **EDRN Phase Documentation**:
    - A half-page EDRN Phase Documentation Summary explicitly stating the current phase and the evidence supporting that assessment. Evidence could be copies or citations of up to five key publications or internal study reports supporting phase designation (as described in the table above).
3. **Prior Tina's Wish Support (0.5 Page)**: If you have previously received funding from Tina's Wish, please provide a summary of the key milestones and outcomes achieved through that project and explain how/if that work relates to your current submission.
4. **Proposal Summary (Up to 2 Pages):** The Proposal Summary should concisely describe the proposed translational research and its relevance to the A2C Grant. Please include the following:
    - Proposed Research Plan: The research plan should have the following sub-headers:
        i. *Scientific Background* (describe the importance of the proposed research in the context of current scientific challenges and opportunities and the rationale for undertaking the study, the rigor of the scientific background for the work and whether the scientific background justifies the proposed study.)
        ii. *Impact* (how the proposed research will address a critical problem or unmet need in early detection of ovarian cancer and how successful completion of the proposed work will advance the project toward clinical testing)
        iii. *Innovation* (in the context of early detection or interception of ovarian cancer, including how it advances beyond existing approaches)
        iv. *Alignment with Tina's Wish mission* (pursuit of an effective screen for early detection or a prevention strategy for ovarian cancer)
        v. *Rationale*. Briefly describe the quantitative results generated to date that support the feasibility and translational potential of the proposed early detection test.
        vi. *Proposed Plan (with Milestones)*. Applicants should explain why this is the appropriate stage for acceleration and how completion of the proposed work will position the project for a future government or industry-funded clinical trial.
        vii. *Team*. Briefly describe how collaborative science will be used to advance the research initiative.

5. **NIH Biographical sketch**: Please use the NIH 5-page biosketch format for PI and Co-PIs only (no other key investigators at LOI stage)

Contact

If you have any questions regarding the A2C grant please contact Vidya Ganapathy, Scientific Affairs and Grants Manager, at vganapathy@tinaswish.org or grants@tinaswish.org.