

# Schedule 5 – EOI Form

An electronic copy of this form is available from [www.aibl.csiro.au](http://www.aibl.csiro.au)

## Expression of Interest (EOI)

Australian Imaging Biomarkers and Lifestyle Flagship Study of Ageing (AIBL)

Date of this Expression of Interest ( <i>Eoi</i> )	
Legal Name of the Entity Applying (Applicant)	
Applicant's Business Address	
Applicant's ABN (for Australian organisations)	
Applicant's principal business (short description)	
Name of Principal Contact	
Contact details of Principal Contact	(office) (mobile) (email)
What proposed technological enhancement, innovation or R&D program do you propose to conduct using AIBL Study Data and/or Samples?	
Project outline:  Describe how the proposed technological enhancement, innovation or R&D program would add value to our current knowledge of Alzheimer's or other neurological disease.  (1-2 paragraphs max)	
Please include comment on:  Potential to collaborate amongst AIBL parties	

Information required from the AIBL Study Data	
AIBL Program (Pls tick one)	<input type="checkbox"/> Diagnostics and Biomarkers <input type="checkbox"/> Psychometrics: Clinical/cognitive neuropsychology <input type="checkbox"/> Neuroimaging <input type="checkbox"/> Lifestyle Interventions
Samples (biological materials) required from the AIBL Study  <i>Samples are strictly limited and only in rare circumstances will requests over 200 µl be accepted</i>	
How the information will be used and/or published	
Other research institutions or third parties which may be involved	
Please list all contributions, whether cash or in-kind to the Project (these may be audited by the AIBL Scientific Management Committee) including amounts sought from AIBL	
<p>What is the nature of any IP that the Applicant seeks to develop?</p> <p>Will the Applicant bring any IP of its own or of a third party to any project requiring use of AIBL results and materials?</p> <p>What potential IP issues are you aware of?</p> <p>(Note: the AIBL study requires shared IP benefit from any new project, unless there are specific circumstances that prevent this).</p>	
List any conflict of interest or any other party that may have rights to the research outcomes or any IP created.	

Please provide a detailed CV and academic record of the Principal Investigator highlighting major achievements relevant to the AIBL Study	
Has the Applicant worked or is the Applicant currently working with any of the AIBL parties? <b>If yes, please provide details of the above and contact person details.</b>	
Is the Applicant employed by or controlled by any of the AIBL parties?	
At which institutions will ethics and other necessary approvals be required to perform the proposed study, other than the AIBL parties' institutions?	
<i>ADDITIONAL INFORMATION REQUIRED IF THE APPLICANT IS A COMPANY</i>	
How long has the Applicant been in its current business?	
How many employees (ie. EFTs) does the Applicant have?	
Identify the Applicant's basic corporate structure: eg. Private / Public / Joint Venture / Trust	
Applicant's Annual Turnover for each of the financial years it has been operating.	

By signing this EOI, the Applicant acknowledges the following Terms and Conditions:

### **Terms and Conditions**

In order to further the AIBL study program, the AIBL parties reserve the right to seek financial returns or in some circumstances equity in an Applicant's program that uses AIBL results and materials to contribute to the costs of growing and maintaining the AIBL samples. The nature of the consideration will be decided on a case by case basis depending on the circumstances of each EOI. The terms of any access to the AIBL study results and materials will be negotiated only after the AIBL Scientific Management Committee has reviewed and approved the Applicant's EOI. This EOI is not intended to be legally binding, and where the Applicant is not an AIBL party, is subject to execution of a contract formalizing those terms (EOI Agreement or Project Agreement), which will

include agreement by the Applicant to observe the Publications Guidelines pertaining to AIBL (available on the AIBL website, [www.aibl.csiro.au](http://www.aibl.csiro.au)).

**Signed by the Applicant**

\_\_\_\_\_  
Signature of director/duly authorised representative

\_\_\_\_\_  
Name (print)

**Please e-mail or post this Expression of Interest to:**

Larry Ward  
AIBL Business Development and Commercialisation Manager  
Phone : +61 42568844  
Email : [larry.ward@mentalhealthcrc.com](mailto:larry.ward@mentalhealthcrc.com)

**More information:**

Contact Professor Colin Masters, Chair, AIBL Study  
Phone +61 3 9035 6575  
Email [c.masters@unimelb.edu.au](mailto:c.masters@unimelb.edu.au)

**Approved by Scientific Management Committee**

**Approved by Business Development and Administration Committee**


**Notes**

If the Applicant is not an AIBL party or is collaborating with a party who is not an AIBL party, this approval is contingent on final legal contracts being entered.

If during the course of generating such contracts it is determined that the transaction needs to go through AIBL's commercial approval process and/or oversight committees, other approvals will be required.

\_\_\_\_\_  
**Professor Colin Masters**

*AIBL Chair*

*University of Melbourne*

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**Date**