

Additional information required for checking eligibility

Pre-eligibility information is to be filled and signed by the principal investigator:

1. **Host Institution:**
2. **Disease name:**
3. **Disease code – ORPHA:**
4. **Disease code – OMIM:**
5. **Disease CODE – ICD-11:**

Please, send this form to telethonscience@telethon.it at least 20 working days before the proposal's submission deadline. **Completion of the pre-eligibility form is mandatory.** Principal investigators who submit a proposal without sending the pre-eligibility form to FTELE in due time will be automatically excluded. Applicants will receive feedback on their eligibility status in due time for the proposal' submission.