



Digital Health &  
Discovery Platform  
Digital • Hôpital  
Découverte • Plateforme

# DHIF Letter of Intent (LOI) Application Guide (TerryFoxTrack)

**Purpose:** How to register a profile on [TerryFoxTrack](#) and submit your LOI for the Digital Health Innovation Fund.

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## Key Dates: Digital Health innovation Fund

Letter of Intent Deadline: <b>15 September, 2025 at 11:59 PM PT</b>
Submit between <b>August 15–September 5, 2025</b> , for feedback
Invitation for full application will be sent by <b>October 1, 2025</b>
Full application Deadline: <b>15 November, 2025 at 11:59 PM PT</b>

**Important Note:** Please see the LOI checklist in [EN](#) or [FR](#) to prepare your submission before the deadline: September 15, 2025, at 11:59 pm PT. Submissions written in French will be accepted but will be translated internally into English if necessary for review.

**IMPORTANT:**

For any queries within TerryFoxTrack, please contact [dhdp@tfri.ca](mailto:dhdp@tfri.ca); the Notes section (in TerryFoxTrack, left-hand menu) is unmonitored.

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Notes

Co-Applicants

Application Summary

CONTACT INFORMATION ELIGIBILITY LETTER OF INTENT

Organization

## How to Apply: Registration

1. Register on [TerryFoxTrack](#) by clicking “Register” under “New to the system?”.

TerryFoxTrack

Email

Password

Log In

[Forgot Password?](#)

New to the system?

Register

2. Select the type of organization most relevant to you: “Education, Research or Health Institution” or “Private Company”.

## Registration Options


Please select the type of organization from which you are applying:

**Educational, Research or Health Institution**

**Private Company**

3. Enter the name of your organization.

## Organization Information

 **Instructions**  
Enter the name of your organization. As you start typing a name, our database will suggest a match.

\* Organization Name


tfril

Organization Name: TFRl EMPLOYEE TEST  
Organization Acronym/Short-Hand:  
City:  
State:  
Zip Code:

4. If your organization is not listed, click the link as shown below and fill out the fields for an organization profile, then return to user registration.
  - a. Skip this step if your organization has already been registered.

## Organization Information

Are you a returning user? [Login here.](#)

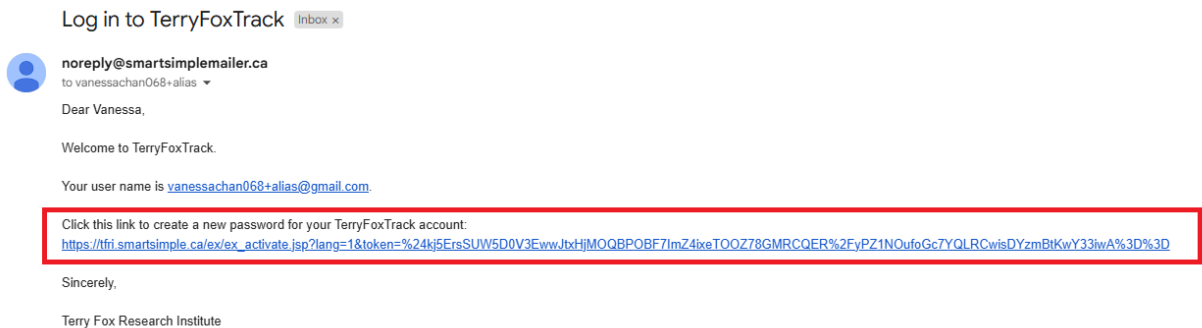
 **Instructions**  
Enter the name of your organization. As you start typing a name, our database will suggest a match.

\* Organization Name

If you can't find your organization, [click here to add it](#). Please do not continue to Contact Information until you have selected or added your organization.

## Contact Information

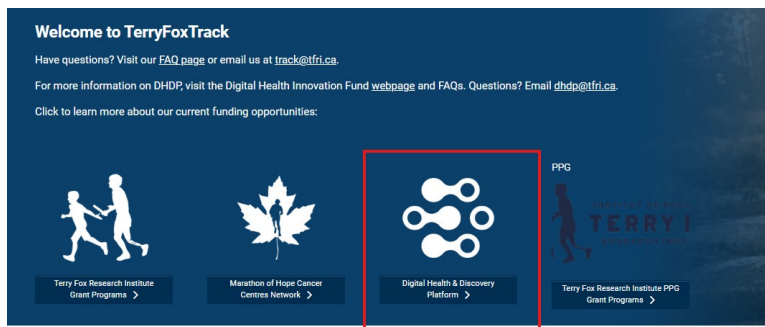
5. Once you have created your TerryFoxTrack profile, you will receive an email inviting you to create a password. This may take a few minutes.



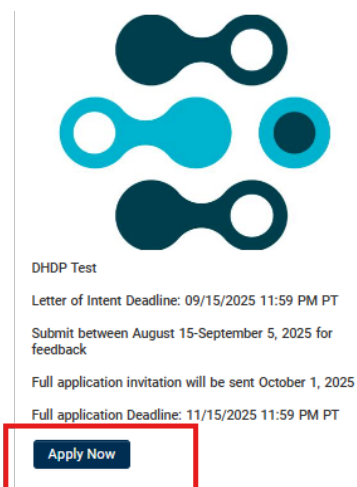
6. Create a password that satisfies the requirements:
  - a. 9+ characters
  - b. 1 upper and 1 lower case letter
  - c. 1 number
  - d. 1 special character
7. If you experience issues with organization or user profile registration, please email [dhdp@tfri.ca](mailto:dhdp@tfri.ca).

## Start Application: Eligibility Questions

1. Select **“Digital Health & Discovery Platform”**. This will take you to the DHDP funding opportunity.



2. Select **“Apply Now”** to begin the application process.



3. Answer a seven-question eligibility questionnaire. Only applicants who meet each of these criteria may apply to the Digital Health Innovation Fund.
  - a. If you do not currently meet any eligibility requirements, please explain why in the box provided.

New Application

> ⓘ

ELIGIBILITY

Please refer to the [BFA](#) and [FAQs](#) on the [Digital Health Innovation Fund webpage](#) for eligibility requirements. If you do not currently meet eligibility requirements below, please explain why, include the measures you have taken to try to meet this requirement. You may still complete the LOI submission; however we strongly encourage a submission with an eligible project team that includes two (2) Canadian SMEs and access to data necessary for the proposed project.

\* The project team LOI submission includes at least two (2) Canadian small and medium sized enterprises (SMEs).

☒ Yes  
☐ No

\* The proposal has appropriate access to data necessary to advance the use cases relevant to the project (e.g., data for federated learning use cases).

☐ Yes  
☒ No

\* If No, please explain why.

Note: Projects should demonstrate that they will have access to the data necessary upon the project start date.

\* Are all components of the LOI addressed, including the presence of a commercialization plan and data access procedure?

☐ Yes  
☐ No

4. **“Save Draft”** to save your progress and continue later, or click **“Submit”** to proceed to the next step, the Letter of Intent.

\* Do you confirm to having the financial resources to support the proposed project?

Note: This fund is not a grant and operates under a reimbursement model. Projects must be conducted in Canada to be eligible for funds. See RFA and FAQs for more information.

☒ Yes  
☐ No

\* Applicants are able to execute agreements and the project will launch in January 2026.

☒ Yes  
☐ No

Save Draft

Submit

# Letter of Intent (LOI) Submission

1. Please ensure all **mandatory fields** with a red asterisk \* are completed:
  - a. **Project Title**
  - b. **Disease Area**
  - c. **Category (or categories)** that best represent the project
  - d. **Approximate number of data points** your team will have access to share through the Platform
  - e. **Brief description of a data point** in this context
  - f. **Brief description of data sources** and intended use for the project
  - g. **Type of data**
  - h. **Total Project Cost** estimate
  - i. **Project leverage/stacking of funds** questions
  - j. **Short Narrative Description of Budget Items**

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Notes

Co-Applicants

Please complete the mandatory questions below.

- Some information is copied directly from your organization and user profiles and will appear in a read-only state within this form.
- If the information displayed is not current, please update your organization and user profiles prior to completing and submitting this form.
- For queries please use [dhdp@ftri.ca](mailto:dhdp@ftri.ca) email; notes section is unmonitored.
- Important Note: Submissions written in French will be accepted but will be internally translated into English if necessary for review by non-bilingual individuals. Visit the Digital Health Innovation Fund [webpage](#) for LOI questions available in French.

Application Summary

CONTACT INFORMATION ELIGIBILITY **LETTER OF INTENT**

Visit the Digital Health Innovation Fund [webpage](#) for the LOI checklist and templates.

\* Project Title

\* Disease Area

☐ Oncology

☐ Neurology

☐ Other

\* Please select the category (or categories) that best represents the project:

☐ Data science and machine learning

☐ Federated analytics and privacy-preserving methods

☐ Data-focused use cases (e.g., data wrangling, data augmentation)

☐ Other

\* Enter the approximate number of data points your team will have access to share through the Platform

2. **Upload your LOI file** (using the [template](#)) in Word Document and **PDF** formats. - *Mandatory*
3. **Budget** in [spreadsheet](#) and PDF formats (*see instructions below for saving as PDF*) - *Mandatory*

Here's how to save your budget spreadsheet as a PDF:

- a. Select all content in your LOI Budget spreadsheet.
- b. Go to File → Print (or press Ctrl + P / Cmd + P).

- c. In the Printer dropdown, select Microsoft Print to PDF.
- d. Under Settings, choose Print Selection.
- e. Check Fit All Columns on One Page to ensure the table fits on one page.
- f. Click Print and select where to save your PDF file.

### Print

Copies:

#### Printer

Microsoft Print to PDF  
Ready

[Printer Properties](#)

#### Settings

Print Selection  
Only print the current selection

Pages:  to

☐ Collated  
1,2,3 1,2,3 1,2,3

☐ Landscape Orientation

☐ Letter  
21.59 cm x 27.94 cm

☐ Narrow Margins  
Top: 1.91 cm Bottom: 1.91 cm...

☒ Fit All Columns on One Page  
Shrink the printout so that it i...

[Page Setup](#)

**LOI Budget Template**

**Important Note:** The budget provided is an estimate only and does not constitute a commitment.  
Evidence on eligible expenditures can be found in the Eligible Costs Table found under Application Documents at [https://www.dhdp.ca/funding](#)  
[https://www.dhdp.ca/funding/eligibility](#). Budget must be incurred within Canada and excludes employee benefits, vacation, sick leave, statutory holiday pay, taxes, and other expenses part of the overhead allocation percentage. Reference RFA and FAQs for more information about how the Digital Health Innovation Fund's reimbursement model operates and combining of funds with other government assistance.

Total Project Cost (CAD)

Partner	CDN SME Y/N?	Finance Contact (email)	Website Address
Partner 1 (Max 1)	Y/N		
Partner 2 (Max 1)	Y/N		
Partner 3 (Max 1)	Y/N		

(insert more rows as needed)

#### Budget Narrative

- Describe the main components included in your budget, which partner will be responsible for which aspects?
- Describe your sources of funds and your proposed financing plan to cash manage the reimbursement model.
- Describe any expected amounts and purposes of any form of government assistance with your project costs.
- What are the key financial components that make this proposal feasible to meet milestones and deliverables?
- Any other relevant information

#### Budget Breakdown by Project Partner

4. Fill DHDP Network Member Agreement section – *Not mandatory at LOI stage*
  - a. Download the Network Member Agreement
  - b. Share it with all your team partners.
  - c. Have this agreement signed by a signing authority of each team partner's organization.
  - d. Upload the signed Network Member Agreements as PDFs.

✓ DHDP Network Membership

Each collaborating party will need a signing authority to sign the DHDP Network Member Agreement to be eligible for funds. For example, a team of 2 SMEs requires 1 agreement per SME.

[Download Network Member Agreement](#)

Upload - Network Member Agreement

Drop files here or [browse files](#)

Maximum file size: 2 GB | Allowed file types: PDF

Network Agreement Tracking

Complete the table with the signee shown on newly uploaded Network Member Agreements.

[Add/Update](#)

5. Add or update the Network Member Agreement signee information by clicking **Add/Update** under “Network Agreement Tracking”
  - a. Click the **plus sign** to enter the signee information, and then click “**Save**”.
  - b. This table can also be updated in the Full Application stage.

**Network Agreement Tracking**

Complete the table with the signee shown on newly uploaded Network Member Agreements.

**Add/Update**

**Network Member Agreement**

*SME (Small- and Medium- sized Enterprise) is defined as fewer than 499 employees.*

First Name	Last Name	Role	Category	Organization Name	Email of Signee
<input type="text"/>	<input type="text"/>	<input type="text"/>	Select One ▼	<input type="text"/>	<input type="text"/>

**+**

**Save** **Clear**

6. Upload the CV/resume where applicable as PDF and Word document for each academic/healthcare collaborator.
7. Answer the “**Request Feedback**” question if you wish to receive feedback on your LOI.
  - a. Feedback is only available if you submit your LOI before September 5, 2025.
8. Click “**Save Draft**” to continue working on your LOI later or click “**Submit LOI**” when you are ready to send your Letter of Intent to the DHDP team.

**\* Request Feedback**

If requested, an automatic email will be sent when feedback becomes available.

☐ Yes ☐ No

**< BACK**

**Save Draft** **Submit LOI**

9. You will receive an email confirming your LOI submission shortly afterward. If you do not receive this email within one business day, please contact [dhdp@tfri.ca](mailto:dhdp@tfri.ca).



## Inviting co-applicants to view or edit the application

1. Invite co-applicants to view or edit the application by adding them as **“Co-Applicants”** from the left-hand menu. Click the **plus sign** to add a Co-Applicant, enter their contact information, and then click **“Invite”**.

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Invite co-applicants to view or edit the application

Prefix	First Name	Last Name	Email	Role	Status
				Co-Applicant	Draft

+ Save Invite

2. Click **“Save Draft”**, either at the eligibility stage or the Letter of Intent stage, for the invitation to be sent.
  - a. Invited co-applicants will receive an email to complete their registration process in the system.
  - b. Once their profile is created, they will be able to collaborate on your application.

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ELIGIBILITY

Please refer to the [REA](#) and [FAQs](#) on the [Digital Health Innovation Fund webpage](#) for eligibility requirements. If you do not currently meet eligibility requirements below, please explain why; include the measures you have taken to try to meet this requirement. You may still complete the LOI submission; however we strongly encourage a submission with an eligible project team that includes two (2) Canadian SMEs and access to data necessary for the proposed project.

\* The project team LOI submission includes at least two (2) Canadian small and medium sized enterprises (SMEs).

☒ Yes  
☐ No

\* The proposal has appropriate access to data necessary to advance the use cases relevant to the project (e.g., data for federated learning use cases).

☒ Yes  
☐ No

\* Are all components of the LOI addressed, including the presence of a commercialization plan and data access procedure?

☐ Yes  
☒ No

\* If No, please explain why.

Note: We strongly encourage that all components of the LOI be thoroughly addressed within the 10-page limit, using Arial font, size 11. [The LOI checklist](#) and templates are key reference tools to prepare for submission.

Save Draft Submit