

PILOT PROJECT RESEARCH TRAINING PROGRAM

FUNDING APPLICATION

Fiscal year 2009-2010 Submit to Salvatore Cali per application instructions. *Submission deadline is Wednesday, April 1, 2009*

() Application instructions have been read and followed. () Electronic copy of application and full proposal attached.

NORA Sector or Priority Area(s): _____

Key words describing proposal: _____

PROJECT TITLE (Limit to 60 characters)

PRINCIPAL INVESTIGATOR

_____ Name (print)

_____ UIN or Organization ID #

_____ Organization name

_____ Department name

_____ Address

_____ E-mail Address

_____ Mail Code

_____ Phone

_____ Title/Rank

_____ Appointed to this Rank (Mo./Yr.)

_____ Location(s) of Research

COLLABORATORS (Names and Departments) _____

CHECK LIST SPECIAL CLEARANCES

HUMAN SUBJECTS ?	If "Yes", indicate IRB application type expected or if pending:	Assurance of compliance/ protocol #:	Vertebrate animals ?	If "Yes" IACUC approval date or if pending:	Animal welfare assurance #:
<input type="checkbox"/> No	<input type="checkbox"/> Exemption		<input type="checkbox"/> No		
<input type="checkbox"/> Yes	<input type="checkbox"/> Full IRB		<input type="checkbox"/> Yes		
	<input type="checkbox"/> Expedited Review				
	<input type="checkbox"/> Pending				

RESEARCH TO BE CONDUCTED:

() Hospitals or clinics will be used.....Hospital/Clinic Approval _____

() Radiation or radioisotopes will be used..... Permit Number _____

() Recombination DNA is involved..... Protocol No. _____

()Hospitals or clinics will be used..... Hospital/Clinic Approval _____

() FDA/IND involved..... Number _____

() Radiation or radioisotopes will be used..... Permit Number _____

() Research Resources Center equipment to be used..... RRC approval _____

() Clinical Research Center to be used.....CRC approval _____

EQUIPMENT REQUESTS:

Matching funds for requests over \$500 are required; maximum equipment costs funded are \$2,000; see equipment budget guidelines.

SOURCE	AMOUNT	SIGNATURE
_____	_____	_____
_____	_____	_____

STATEMENT FROM PRINCIPAL INVESTIGATOR: I confirm that I have read the PPRT Grants Policy Statement and will comply with any applicable Special Requirements and my written research plan in the conduct of this research.

Name/Institution: _____

Date

STATEMENT FROM RESEARCH MENTOR: (signature may be faxed if mentor is at a different institution from applicant)

I confirm that I will advise the principal investigator in the scientific aspects of the conduct of this research.

Name/Institution: _____

Mentor Signature

Date

STATEMENT FROM DEPARTMENT/UNIT HEAD

All necessary space and supplies not requested in this application have been made available in the department.

I confirm that the Principal Investigator is affiliated with my department as a _____.

Department/Unit Head Signature

Date

Print Department/Unit Head Name _____

Research Plan:

Abstract of Research Plan: State the project goal and objectives. Describe concisely the research design and methods for achieving these objectives as well as the potential for improving safety and health in the work environment (maximum 200 words).

Research Proposal: Attach the full proposal narrative (maximum 10 pages for items 1-5) to the application. The full proposal should describe:

1. Specific Aims
2. Background and Significance
3. Preliminary Studies (not required)
4. Research Design and Methods, including any anticipated obstacles and plans for overcoming them
5. Plans for publication and for additional grant applications that could be made based on the results of the project.
6. References.
7. Protection of Human Subjects
8. Inclusion of Women and Minorities
9. Targeted/Planned Enrollment Table
10. Inclusion of Children
11. Vertebrate Animals
12. Select Agent Research

Statement of Mentorship Support: Applicants must also identify and complete arrangements for a research mentor who will provide guidance for the research. A signed agreement to mentor from a senior investigator is required (see application). Further information on the role of a research mentor is available at: <http://grants1.nih.gov/grants/guide/pa-files/PAR-04-105.html> under the Special Requirements section. Include a brief paragraph describing the role of the research mentor in this research project.

Currently Available Resources

Office:

Office Equipment:

Computer:

Laboratory:

Clinic:

Animal:

Environmental Sampling Equipment:

Other:

The appendix is not included in the 10 page limit and should include:

- Budget: Please use the Excel Budget Proposal Worksheet provided at www.uic.edu/spha/glakes/funding.html or an equivalent spreadsheet.
Please have your business manager review your budget!
- Budget justification in an attached budget justification that addresses:
 - Key Personnel- List all personnel names, organization and project duties
 - Salaries and Wages
 - Fringe Benefits
 - Travel
 - Consultants: General Services
 - Supplies
 - Tuition Remission
 - Facilities and Administration (F&A) Allocation (Indirect)
- Timeline for the proposed research;
- External Funding Plan: A description of how the results will be leveraged into external applications, a time-line for proposal grant submission to external funding agency (specify), and a plan for expanding the work as a line of research
- NIH Biosketch for the Principle Investigator and co-investigators (<http://grants.nih.gov/grants/funding/phs398/biosketchsample.pdf>);
- A certificate of completion of continuing education in a human subjects protection program dated within the last two years for all investigators;