**INDIANA UNIVERSITY KRANNERT INSTITUTE OF CARDIOLOGY**

**DR. CHARLES FISCH CARDIOVASCULAR RESEARCH AWARD APPLICATION**

**TO THE**

##### RESEARCH COMMITTEE

PRINCIPAL INVESTIGATOR NAME:

RANK:

DEPARTMENT: EMAIL ADDRESS:

CAMPUS ADDRESS:CAMPUS PHONE:

TITLE OF PROPOSAL:

ADDRESS WHERE WORK

WILL BE PERFORMED:

BUDGET PERIOD:

From:  To:

(Month/Day/Year)

AMOUNT REQUESTED:

$ Percent Effort **%**

 APPROVAL

 YES NO PROTOCOL # DATE

RECOMBINANT DNA? **[ ]**  **[ ]**

VERTEBRATE ANIMALS? **[ ]**  **[ ]**

HUMAN SUBJECTS? **[ ]**  **[ ]**

**Will this project involve Clinical Research? [ ]  [ ]**

**Is this application a resubmission? [ ]  [ ]**

“The undersigned agrees to accept responsibility for the scientific and technical conduct of the research project and for provision of required progress reports if a grant is awarded as the result of this application.”

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Date Principal Investigator

Principal Investigator/Program Director (Last, first, middle):

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| DESCRIPTION: State the application’s broad, long-term objectives and specific aims, making reference to the health relatedness of the project. Describe concisely the research design and methods for achieving these goals. Avoid summaries of past accomplishments and the use of the first person. This abstract is meant to serve as a succinct and accurate description of the proposed work when separated from the application. If the application is funded, this description, as is, will become public information. Therefore, do not include proprietary/confidential information. **DO NOT EXCEED THE SPACE PROVIDED.** |
|       |
| PERFORMANCE SITE(S) *(organization, city, state)*                                         |
| KEY PERSONNEL. See instructions. *Use continuation pages as needed* to provide the required information in the format shown below.Start with Principal Investigator. List all other key personnel in alphabetical order, last name first. |
| Name | Organization | Role on Project |
|       |       |       |
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 Principal Investigator/Program Director (Last, first, middle):

Reasons for Application and response to reviews, if resubmission – one page maximum

State the reasons for the application at the present time and specify whether these are start-up funds for a new investigator or bridge funding between periods of extramural grant support. If the request is a resubmission of a proposal previously reviewed by the Research Committee, the applicant must include a detailed introduction showing what changes have been made to address the previous comments. Changes should also be noted in the body of the proposal and prior review comments included in the appendices.

 Principal Investigator/Program Director (Last, first, middle):

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| **DETAILED BUDGET FOR INITIAL BUDGET PERIOD****DIRECT COSTS ONLY** | FROM      | THROUGH      |
| PERSONNEL *(Applicant organization only)* |  | % |  | DOLLAR AMOUNT REQUESTED *(omit cents)* |
| NAME | ROLE ONPROJECT | TYPEAPPT.*(months)* | EFFORTONPROJ. | INST.BASESALARY | SALARYREQUESTED | FRINGEBENEFITS | TOTAL |
|       | PrincipalInvestigator |       |       |       |       |       |       |
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|  **SUBTOTALS** |        |       |       |
| CONSULTANT COSTS      |  |
|  |       |
| EQUIPMENT *(Itemize)*      |  |
|  |        |
| SUPPLIES *(Itemize by category)* |  |
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|  |       |
| TRAVEL |  |
|       |       |
| PATIENT CARE COSTS | INPATIENT |       |
|  | OUTPATIENT |       |
| ALTERATIONS AND RENOVATIONS *(Itemize by category)* |  |
|       |       |
| OTHER EXPENSES *(Itemize by category)* |  |
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|       |  |
|       |       |
| SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD | **$**      |
| CONSORTIUM/CONTRACTUAL | DIRECT COSTS |       |
| COSTS |  FACILITIES AND ADMINISTRATIVE COSTS |       |
| **TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD** *(Item 7a, Face Page)* | **$**      |

 Principal Investigator/Program Director (Last, first, middle):

BUDGET JUSTIFICATION:

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| **BIOGRAPHICAL SKETCH**Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.Follow this format for each person.  **DO NOT EXCEED FOUR PAGES.** |
|  |
| NAME | POSITION TITLE |
| eRA COMMONS USER NAME (credential, e.g., agency login) |
| EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.) |
| INSTITUTION AND LOCATION | DEGREE(if applicable) | MM/YY | FIELD OF STUDY |
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**NOTE: The Biographical Sketch may not exceed four pages. Follow the formats and instructions below.**

**A. Personal Statement**

Briefly describe why your experience and qualifications make you particularly well-suited for your role (e.g., PD/PI, mentor, participating faculty) in the project that is the subject of the application. Within this section you may, if you choose, briefly describe factors such as family care responsibilities, illness, disability, and active duty military service that may have affected your scientific advancement or productivity.

**B. Positions and Honors**

List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.

**C. Selected Peer-reviewed Publications**

NIH encourages applicants to limit the list of selected peer-reviewed publications or manuscripts in press to no more than 15. Do not include manuscripts submitted or in preparation. The individual may choose to include selected publications based on recency, importance to the field, and/or relevance to the proposed research. When citing articles that fall under the Public Access Policy, were authored or co-authored by the applicant and arose from NIH support, provide the NIH Manuscript Submission reference number (e.g., NIHMS97531) or the PubMed Central (PMC) reference number (e.g., PMCID234567) for each article. If the PMCID is not yet available because the Journal submits articles directly to PMC on behalf of their authors, indicate "PMC Journal - In Process." A list of these Journals is posted at: <http://publicaccess.nih.gov/submit_process_journals.htm>. Citations that are not covered by the Public Access Policy, but are publicly available in a free, online format may include URLs or PMCID numbers along with the full reference (note that copies of publicly available publications are not accepted as appendix material.)

 Principal Investigator/Program Director (Last, first, middle):

**OTHER SUPPORT**: Since the guidelines restrict funding to applicants who do not have extramural funding of $100,000 (direct costs) or greater per annum, it is critical that the Other Support page be clear and detailed, and include funding through program projects, centers, joint grants, etc., as well as the role of the applicant in each grant and any potential overlap. Both Active and Pending support should be listed. Include all information noted below:

ACTIVE/PENDING (Indicate)

Source and Project Number:

Principal Investigator:

Title of Project (or Subproject):

Percent Effort of BRC applicant:

Dates of Approved/Proposed Project:

Annual Direct Costs of Overall project:

Annual Direct Costs of Subproject of BRC applicant:

The major goals of this project are…

OVERLAP

ACTIVE/PENDING (Indicate)

Source and Project Number:

Principal Investigator:

Title of Project (or Subproject):

Percent Effort of BRC applicant:

Dates of Approved/Proposed Project:

Annual Direct Costs of Overall project:

Annual Direct Costs of Subproject of BRC applicant:

The major goals of this project are…

OVERLAP

ACTIVE/PENDING (Indicate)

Source and Project Number:

Principal Investigator:

Title of Project (or Subproject):

Percent Effort of BRC applicant:

Dates of Approved/Proposed Project:

Annual Direct Costs of Overall project:

Annual Direct Costs of Subproject of BRC applicant:

The major goals of this project are…

OVERLAP

 Principal Investigator/Program Director (Last, first, middle):

RESEARCH PLAN: