

Request for Proposals

**IU School of Medicine & Indiana Bioscience
Research Institute**

Antibody Screening Pilot Program

ELECTRONIC RECEIPT DATE

November 14, 2019

The interest in antibodies, both as research tools and as interventional therapies to treat disease, continues to grow. A Phage Display System is one of several well-established technologies that can be utilized to generate antibodies. This platform employs both vast molecular diversity and high throughput screening capacity to create novel antibodies specific to almost any biological target. Recently the Indiana Biosciences Research Institute (IBRI) obtained a license to Eli Lilly and Company's human Fab Phage Display Platform (<https://www.indianabiosciences.org/core-technologies/>). Importantly, this technology directly generates humanized antibodies from multiple diverse libraries and offers several advantages when compared to other methods such as hybridoma screening.

In a one-time pilot program, the leadership of the IBRI and IU School of Medicine (IUSM) will sponsor collaborative research projects utilizing this human Fab Phage Display Platform. Specifically, the IBRI and IUSM will provide both advisory and technical support for: (i) screening to identify new antibody ligands; (ii) target validation biology research; (iii) starting points for optimization of new diagnostics and (iv) starting points for the optimization of new antibody therapeutics. No direct financial support will be provided to the applicant. Awards will be made through a competitive review process. For successful applications, project specific plans will be developed to best meet the aims and objectives of the awarded program.

The Partners currently seek proposals focusing on developing protein-based research tools for the following purposes: (i) screening to identify new antibody ligands; (ii) target validation biology research; (iii) starting points for optimization of new diagnostics and (iv) starting points for the optimization of new antibody therapeutics.

Call for Proposals

The IUSM-IBRI Partnership program will provide technical guidance and support the screening of the Phage Display Library (PDL) to facilitate early stage therapeutics discovery and development work. Priority will be given to potential collaborative projects between IUSM faculty and IBRI Scientists. This is a one-time competitive funding opportunity and should be considered pilot funding. Applications will be reviewed based on scientific merit and the potential impact of utilizing the antibody technology to advance the research objectives of the proposed project.

The submission deadline is November 14, 2019.

A panel of IBRI investigators and IUSM experts will review proposals and make recommendations for awards. The number of awards will be determined by the number of meritorious applications received. Applicants will be notified of award on or about December 1st.

Eligibility:

1. IUSM: All full-time faculty, regardless of tenure status, having a primary appointment within the School of Medicine as Assistant Professor or Assistant

Scientist and above. This includes those faculty appointed as part-time Assistant Professor or above, if they are geographically full-time. Faculty at the IUSM regional centers for medical education are eligible to apply. Postdoctoral fellows are also considered eligible to apply but their faculty PI must serve as a co-PI and submit a letter of support. Faculty with an adjunct appointment to the IUSM are not eligible. *Faculty that hold the title of visiting rank must discuss eligibility with Alan Palkowitz and obtain approval. To discuss eligibility email apalkow@iu.edu.*

2. Applications that promote interdisciplinary collaboration across the IU School of Medicine and the IBRI are strongly encouraged.

Application Procedure: (Application forms are available on the Indiana CTSI website here: [IUSM IBRI Antibody Screening RFA](#) Use the **Start a Submission** button to upload your application.

Page 1. Face page: Include the title of the proposal, principal investigators and his/her affiliation, collaborator(s) and affiliation, where work will be performed. Department / School support must be indicated by completion of all signatures on the face page(s). As submission will be electronically, facsimile or electronic signatures are appropriate.

Page 2-3. Research Plan should have at least 0.5 inch margins and is not to exceed two single-spaced pages, excluding references. Font must be clear and readily legible and reasonable size (use Arial 11pt).

The Research Plan narrative should include:

1. *A brief background describing the project emphasizing therapeutic relevance and significance.*
2. *A description of the current status of the project.*
3. *A description of the current barriers to progress.*
4. *Briefly describe planned next steps for the resulting antibodies along with a timeline for their execution. Include enough specifics about the targeted actions to allow evaluation as to how the results will impact future research / funding and to develop a milestone driven proposal. If this proposal includes a co-PI, describe the plan for continued collaboration.*

Page 4-7: NIH-style biographical sketch of the principal investigators (5-page maximum). The biosketch should be provided in the new NIH format available at <http://grants1.nih.gov/grants/funding/phs398/phs398.html>. It is limited to 5 pages in length and should include positions, honors, publications and selected research projects that are most relevant to the proposed project. For those unfamiliar with the NIH format, more information can be found within section 4.6 of the [PHS398 application instructions document](#).

Page 8-11: NIH-style biographical sketch of the co-investigators. (5-page maximum). The biosketch should be provided in the new NIH format available at

<http://grants1.nih.gov/grants/funding/phs398/phs398.html>. It is limited to 5 pages in length and should include positions, honors, publications and selected research projects that are most relevant to the proposed project. For those unfamiliar with the NIH format, more information can be found within section 4.6 of the [PHS398 application instructions document](#).

Additional Documentation: You may submit up to 6 pages of additional documentation that will support your application. Postdoctoral Fellow applicants must include a letter of support from their mentor / PI in this section. (*Information on the mentor/PI should be included on the face sheet and the biosketch included as above.*)

The proposal should be submitted as a single PDF through the **Start a Submission** link found on the Indiana CTSI website here: [IUSM IBRI Antibody Screening RFA](#)

Contact Information:

For questions regarding scope or review of this proposal, please contact:

Alan Palkowitz

(apalkow@iu.edu)

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Expectations / Post Award Requirements

1. All awards will be monitored for progress by the Indiana CTSI. Progress monitoring includes:

- a. Semiannual progress reports due in January and July that report status of milestone progress along with documentations of external grant submissions/awards, IP, publications, and/or presentations arising from the supported research.
- b. Annual follow-up reports upon request for up to 5 years after the project ends, including but not limited to the following data:
 - i. External grant submissions and awards arising from the supported research
 - ii. Intellectual property arising from the supported research
 - iii. Publications arising from the supported research
 - iv. Additional impacts of the award on your research and the collaboration

2. If the project involves co-PIs, it is expected that this award will lead to continued collaborative efforts, generally reported on the annual progress reports.

3. Award recipients are required to acknowledge receipt of IBRI / IUSM support in any presentation or publication of work funded by the award as follows:

This [(publication was made possible) (project was supported)] by and award from the Indiana Biosciences Research Institute and the Indiana University School of Medicine. The content is solely the responsibility of the authors and does not necessarily represent the official views of either the Indiana Biosciences Research Institute or the Indiana University School of Medicine."