**Edward P. Evans Center for MDS Developmental Research Program (DRP)** 2023 Request for Applications (RFA)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Title of Project (no more than 81 characters):** | | | | | | | | | |
| **Project Start Date:** |  | | | | **Project End Date:** | | |  | |
| **Principal Investigator (PI)** | | | | | | | | | |
| **Name: (Last, First, Middle):** | | | | | **Degree(s):** | | | | |
| **Title:** | | | | | **Mailing Address**: | | | | |
| **Applicant Organization:** | | | | |
| **Department:** | | **Division:** | | | **E-mail Address:** | | | | **Phone Number:** |
| **Evans DRP Only** | | | | | **Evans DRP or SPORE DRP** | | | | |
| **Grant Administrator**  **Contact Name:** | | **Grant Administrator**  **Phone Number:** | | | **Grant Administrator E-mail Address:** | | | | |
|  | |  | | |  | | | | |
| **Human Subjects Research**  NO  YES | | | | IRB APPROVAL PENDING DATE ANTICIPATED  NO  YES  NO  YES | | | | | |
| CLINICAL TRIALS  NO  YES | | | |  | | |  | | |
| **Vertebrate Animals**  NO  YES | | | IACUC APPROVAL#  Approval Date: | | | PENDING  YES  N0  Date Anticipated: | | | |

List Co-Investigators/Collaborators expected to participate on the project

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| --- | --- | --- |
| **Name** | **Prime Institution** | **Department/Division** |
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SIGNATURE OF PRINCIPAL INVESTIGATOR DATE:

(electronic signature is acceptable)

## LAY SUMMARY (250 words maximum)

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| --- | --- | --- |
|  | | |
| **DETAILED BUDGET FOR INITIAL BUDGET PERIOD** **DIRECT COSTS ONLY** | FROM | THROUGH |
|  |  |

List PERSONNEL *(Applicant organization only)* Use Cal, Acad, or Summer to Enter Months Devoted to Project

Enter Dollar Amounts Requested *(omit cents)* for Salary Requested and Fringe Benefits

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME | ROLE ON PROJECT | Cal.  Mnths | Acad.  Mnths | Summer  Mnths | | INST.BASE SALARY | SALARY REQUESTED | FRINGE BENEFITS | | TOTAL |
|  | PD/PI |  |  |  | |  |  |  | |  |
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| SUBTOTALS | | | | | | |  |  | |  |
| CONSULTANT COSTS | | | | | | | | | |  |
| EQUIPMENT *(Itemize)* | | | | | | | | | |  |
| SUPPLIES *(Itemize by category)* | | | | | | | | | |  |
| TRAVEL | | | | | | | | | |  |
| INPATIENT CARE COSTS | | | | | | | | | |  |
| OUTPATIENT CARE COSTS | | | | | | | | | |  |
| ALTERATIONS AND RENOVATIONS *(Itemize by category)* | | | | | | | | | |  |
| OTHER EXPENSES *(Itemize by category)* | | | | | | | | | |  |
| CONSORTIUM/CONTRACTUAL COSTS | | | | | DIRECT COSTS | | | |  | |
| SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD *(Item 7a, Face Page)* | | | | | | | | | $ | 70,000 |
| CONSORTIUM/CONTRACTUAL COSTS | | | | | FACILITIES AND ADMINISTRATIVE COSTS | | | |  | |
| TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD | | | | | | | | | $ | 70,000 |

## BUDGET JUSTIFICATION

OMB No. 0925-0001 and 0925-0002 (Rev. 10/15 Approved Through 10/31/2018)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

| INSTITUTION AND LOCATION | DEGREE  (if applicable) | Completion Date  MM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
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**NOTE: The Biographical Sketch may not exceed five pages. Follow instructions below.**

# A. Personal Statement

Briefly describe why you are well-suited for your role(s) in this project. The relevant factors may include: aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and/or your past performance in this or related fields. Note the following additional instructions:

* For institutional research training, institutional career development, or research education grant applications, faculty who are not senior/key persons are encouraged to complete this section, but not required to do so.
* Applicants for dissertation research awards should include a description of their career goals and intended career trajectory and their interest in the specific areas of research designated in the FOA, in addition to the information outlined above.
* Candidates for Research Supplements to Promote Diversity in Health-Related Research should include a description of their general scientific achievements and/or interests, as well as specific research objectives and career goals, in addition to the information outlined above. Indicate any current source(s) of educational funding.
* If there are factors affecting your past productivity that you wish to explain, such as family care responsibilities, illness, disability, or military service, you may address them in your personal statement.
* Indicate if you have published or created research products under another name.
* You may mention specific contributions to science that are not included in Section C. Do not present or expand on materials that should be described in other sections of this biosketch or the application.
* Figures, tables and graphics are not allowed.

You may cite up to four publications or research products that highlight your experience and qualifications for this project. Research products can include audio or video products; conference proceedings such as meeting abstracts, posters or other presentations;patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware.

# B. Positions and Honors

List in chronological order positions held since the completion of your most recent degree, concluding with your present position. High school students and undergraduates may include any previous positions. For individuals, such as fellowship applicants or career development award candidates, who are not currently located at the applicant organization, include the expected position at the applicant organization, with the expected start date.

List any relevant academic and professional achievements and honors. In particular:

* Students, postdoctorates, and junior faculty should include scholarships, traineeships, fellowships, and development awards, as applicable.
* Clinicians should include information on clinical licensure and specialty board certification, if applicable.
* Include present membership on any Federal Government public advisory committee.

# C. Contribution to Science

Candidates for Research Supplements to Promote Diversity in Health-Related Research who are high school students, undergraduates, and postbaccalaureates are not required to complete this section.

Briefly describe up to five of your most significant contributions to science. While all applicants may describe up to five contributions, graduate students and postdoctorates are encouraged to consider highlighting two or three they consider most significant. Descriptions may include a mention of research products under development, such as manuscripts that have not yet been accepted for publication.

Each contribution should be no longer than one half page, including citations. These contributions do not have to be related to this project. For each contribution:

* Indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work.
* You may cite up to four papers accepted for publication or research products that are relevant to the contribution.
  + Research products can include audio or video products; conference proceedings such as meeting abstracts, posters or other presentations;patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware.
  + These citations do not have to be authored by you.

You may provide a URL to a full list of your published work. This URL must be to a Federal Government website (a .gov suffix). NIH recommends using [My Bibliography](http://www.ncbi.nlm.nih.gov/books/NBK53595/). Providing a URL to a list of published work is not required, and reviewers are not required to look at the list.

# D. Research Support

Note the following instructions for specific types of applicants/candidates:

* High school students are not required to complete this section**.**
* Applicants for predoctoral and postdoctoral fellowships, dissertation research grants, and candidates for Research Supplements to Promote Diversity in Health-Related Research from the undergraduate through postdoctoral levels should use this section to provide information about their scholastic performance, following the instructions below. In situations where applicants/candidates in these categories also have research support, they should complete both parts of this section.

*Research Support*

For all other individuals required to complete a biosketch, list selected ongoing and completed research projects for the past three years (Federal or non-Federal support). Briefly indicate the overall goals of the projects and your responsibilities. Do not include number of person months or direct costs.

Do not confuse “Research Support” with “Other Support.” Though they sound similar, these parts of the application are very different.

* As part of the biosketch section of the application, “Research Support” highlights your accomplishments, and those of your colleagues, as scientists. This information will be used by the reviewers in the assessment of each individual’s qualifications for a specific role in the proposed project, as well as to evaluate the overall qualifications of the research team.

In contrast, “Other Support” information is required for all applications that are selected to receive grant awards. NIH staff will request complete and up-to-date “other support” information from you after peer review.

*Scholastic Performance*

Predoctoral applicants/candidates (including undergraduates and postbaccalaureates): List by institution and year all undergraduate and graduate courses, with grades. In addition, in the space following the chart, explain any grading system if other than 1-100, A, B, C, D, F, or 0-4.0. Show levels required for a passing grade.

Postdoctoral applicants: List by institution and year all undergraduate courses and graduate scientific and/or professional courses germane to the training sought under this award, with grades. In the space following the chart, explain any grading system if other than 1-100, A, B, C, D, F, or 0-4.0. Show levels required for a passing grade.

## RESEARCH PLAN (6 pages maximum)

## OTHER SUPPORT (NIH format)