## Grant Application

## UR CFAR

**September 2015 Pilot Application**

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| 1a. TITLE OF PROJECT        |

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| 2a. CO-PRINCIPAL INVESTIGATOR (SMD)        | 2b. DEGREE(S) | 2c. NEW INVESTIGATOR  [ ]  No [ ]  Yes |
|        |        | [ ]  No [ ]  Yes |
| 2d. POSITION TITLE | 2e. DEPARTMENT, MAJOR SUBDIVISION (if applicable) |
|        |        |
| 2f. TELEPHONE | 2g. MENTOR       |
|  TEL ext:        Email:       |        |

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| 2a. CO-PRINCIPAL INVESTIGATOR (SON)        | 2b. DEGREE(S) | 2c. NEW INVESTIGATOR  [ ]  No [ ]  Yes |
|        |        | [ ]  No [ ]  Yes |
| 2d. POSITION TITLE | 2e. DEPARTMENT, MAJOR SUBDIVISION (if applicable) |
|        |        |
| 2f. TELEPHONE | 2g. MENTOR       |
|  TEL ext:        Email:       |        |

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| 3. ADDITIONAL INVESTIGATORS (if applicable)  |
| NAME | DEPARTMENT, MAJOR SUBDIVISION (if applicable) |
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| 4a. HUMAN SUBJECTS RESEARCH  [ ]  No [ ]  Yes |  4b. RESEARCH EXEMPT  [ ]  No [ ]  Yes If yes, exemption #       |
| 4c. STATUS OF IRB SUBMISSION/APPROVAL [ ]  Approved [ ]  Submitted, review pending [ ]  Not yet submitted  | 4d. CLINICAL TRIAL |
|  [ ]  No [ ]  Yes |

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| 5a. VERTEBRATE ANIMALS  [ ]  No [ ]  Yes |  5b. STATUS OF IACUC SUBMISSION/APPROVAL [ ]  Approved [ ]  Submitted [ ]  Not yet submitted |

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| 6a. BIOHAZARD SAFETY Will the project use any materials that would require IBC approval: [ ]  No [ ]  Yes | 6b. HUMAN EMBRYONIC STEM CELL [ ]  No [ ]  Yes |

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| 7a. PROPOSED PROJECT PERIOD       | 7b. FUNDS REQUESTED       | 7c. PROPOSED SUBCONTRACT [ ]  No [ ]  Yes |