## 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 |