

**LCCRO Pilot Project**

**Application**

**Part A. Project Summary**

**1.** What is the **title** of the proposed research project?

**2.** Please list [Key Personnel](https://grants.nih.gov/grants/glossary.htm#Senior/KeyPersonnel), expanding the boxes as needed. UVM-based Investigators must be Full or Associate [UVM Cancer Center Members](http://www.med.uvm.edu/uvmcancercenter/members/members) and at least one PI must be a Full member. Investigators whose application for UVM Cancer Center Membership has been submitted but is pending will be provisionally accepted. **If any have changed since the Letter of Intent was submitted please indicate accordingly.**

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| --- | --- | --- | --- | --- |
| [Investigator](http://www.med.uvm.edu/uvmcancercenter/core-facilities/genome-technologies) Name & Degree(s) (e.g., Jayne P. Smith, MD, PhD) | Academic Position or Title | Department or Division & College. If outside UVM please include institution. | Project Role (PD/PI, Co-I, etc.) | [UVMCC Program Affiliation (CCPHS, HTFP, MMM,](http://www.med.uvm.edu/uvmcancercenter/members/member-resources) Unaffiliated or Pending) |
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Please note that [UVM policy](https://www.uvm.edu/policies/grants/effortreporting.pdf) requires a minimum 1% effort commitment for PIs and key personnel during the period of any sponsored agreement. Since LCCRO guidelines prohibit salary support for tenured or tenure-track personnel, this nominal effort commitment may have to be cost-shared from other departmental or divisional sources. Please consult NIH guidelines for [Program Director/Principal Investigator (PD/PI)](http://grants.nih.gov/grants/glossary.htm%23ProgramDirector/PrincipalInvestigator(PD/PI)), [Co-Investigator](https://grants.nih.gov/grants/glossary.htm#CoInvestigator), and [Other Significant Contributor](https://grants.nih.gov/grants/glossary.htm#OtherSignificantContributorsOSCs) in determining appropriate roles for key personnel.

**3.** Is this a **resubmission?**

**4. Prior recent funding**: Have any of the investigators been awarded a University of Vermont Cancer Center intramural research grant in the last two years? If yes, please provide title, sponsor, project period, annual direct cost. If relevant to this project provide a one or two sentence description of what the project accomplished.

**5. Overlap**: Do any of the investigators have current or pending awards for this or similar research projects? If yes, please provide title, sponsor, project period, annual direct cost.

**6.** Will **regulatory approval**s be necessary? Approvals do not need to be in place at time of application but must be submitted to governing agencies within 30 days of Notice of Grant Award. Applicants are strongly urged to consult with relevant [Translational Disciplinary Teams](http://www.med.uvm.edu/uvmcancercenter/members/trans-disciplinary-teams-(tdts)) for projects involving [PRMC & IRB approvals](http://www.med.uvm.edu/uvmcancercenter/protocol-review/submission-requirements)

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| Human Subjects (IRB) |  |
| Live Vertebrate Animals (IACUC) |  |
| Human Embryonic Stem Cells |  |
| Infectious Agents or Toxins (IBC Biohazard) |  |
| Recombinant DNA (IBC Biohazards) |  |
| Radioactive Substances, Lasers, and/or X-rays |  |
| Hazardous Chemicals |  |
| Human or simian cells, tissue, blood or body fluids |  |
| Purchase of Genomic Arrays |  |

**7.** Will any **shared resources** be used? Research supported by these awards must utilize [UVMCC Core Facilities](http://www.med.uvm.edu/uvmcancercenter/core-facilities/core-facilities) on a preferential basis. Awarded funds cannot be used to support external services if these services are available at UVM.

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| [Advanced Genome Technologies Core (AGTC)](http://www.med.uvm.edu/uvmcancercenter/core-facilities/genome-technologies) |  |
| [Biobank Core Facility](http://www.med.uvm.edu/uvmcancercenter/core-facilities/biobank) |  |
| [Bioinformatics Shared Resource (BSR)](http://med.uvm.edu/bsr/home) |  |
| [Biostatistics Core Facility](http://www.med.uvm.edu/uvmcancercenter/core-facilities/biostatistics) |  |
| [Cancer Translational Research Laboratory (CTRL)](http://www.med.uvm.edu/uvmcancercenter/core-facilities/cancer-translational-research) |  |
| [Microscopy Imaging Center (MIC)](http://www.med.uvm.edu/uvmcancercenter/core-facilities/microscopy-imaging) |  |
| [UVM Cancer Center Clinical Research Office (for clinical trial staffing)](mailto:Karen.M.Wilson@uvm.edu) |  |

**8. Lay Summary:** Please provide a three or four sentence description of the proposed research that summarizes the focus and cancer relevance of the project in non-scientific terms such that might be used for a general interest announcement.

**9. Abstract** – in about a page or less, please summarize the cancer relevance & significance of the project, the specific aims & expected outcomes, and how the project will contribute to the development of a full research proposal for national, peer-reviewed funding. Please do not include any proprietary data or confidential information. If in doubt about what’s proprietary or confidential; please contact the [Office of Technology Commercialization](https://www.uvm.edu/uvminnovations/) at [innovate@uvm.edu](mailto:innovate@uvm.edu).

**10. Leadership Plan:** In about a page or less, discuss how the team members will function on the project and how their inclusion will facilitate the accomplishment of the identified aims. Describe the roles and areas of responsibility of the Key Personnel and the decision-making process for management of the project.

**Part B. Project Description**

**11. Specific Aims** (limit to one page)

**12. Research Strategy** (limit to five pages). Please address the following:

* Significance
  + Identify the importance of the problem or critical barrier to progress in the field that the proposed project addresses.
  + Identify how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields
  + Identify how the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field will be changed if the proposed aims are achieved.
* Innovation
  + Describe how the application challenges and seeks to shift current research or clinical practice paradigms.
  + Describe any novel theoretical concepts, approaches, or methodologies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation or interventions.
  + Describe and refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions
* Approach
  + Describe how the application challenges and seeks to shift current research or clinical practice paradigms.
  + Describe any novel theoretical concepts, approaches, or methodologies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation or interventions.
  + Describe and refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions

**13. Response to Reviewer Comments, if applicable (limit to one page)**

**14. Literature citations** (no page limit)

**15A. Budget** – please use the Budget Form and Budget Justification templates on the following pages. Please ask your business or finance administrator, consult [NIH Budget Development Guidelines](https://grants.nih.gov/grants/how-to-apply-application-guide/format-and-write/develop-your-budget.htm#personnel), or contact [edward.north@uvm.edu](mailto:edward.north@uvm.edu?subject=LCCRO%20Pilot%20Project%20Application-BUDGET) if you have questions about how to complete them. Please see specific program guidelines at [Intramural Funding Web Portal](http://www.med.uvm.edu/uvmcancercenter/research/intramural-funding) for a list of allowable and unallowable expenses.

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| Program Director/Principal Investigator (Last, First, Middle): |  | | |
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| 15A DETAILED BUDGET FOR INITIAL BUDGET PERIODDIRECT 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)* | | | | | | | | | $ |  |
| CONSORTIUM/CONTRACTUAL COSTS | | | | | FACILITIES AND ADMINISTRATIVE COSTS | | | |  | |
| TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD | | | | | | | | | $ |  |

**15B BUDGET JUSTIFICATION:**

Personnel (non-tenured & non-tenure track research personnel only)

Consultant Costs

Equipment (up to $5,000)

Supplies

Domestic travel directly related to the aims of the project (up to $2,000)

Inpatient Care Costs

Outpatient Care Costs

Alterations and Renovations

NOT PERMITTED

Other Expenses

Consortium/Contractual Costs

**16. Approvals** – please use the following form to indicate Department Chair or Division Chief’s acceptance of the described roles for each of the Key Personnel. Separate signature pages may be appended as needed for each chair or chief.

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| [Investigator](http://www.med.uvm.edu/uvmcancercenter/core-facilities/genome-technologies) | Project Role | Department or Division | Chair or Chief’s Signature | Date |
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1. Please provide [NIH format Biosketches](https://grants.nih.gov/grants/forms/biosketch.htm) for each of the Key Personnel. Please limit the Biosketches to no more than five pages each.

For application submission, please assemble all items in the following order into one PDF and send by email to [edward.north@uvm.edu](mailto:edward.north@uvm.edu?subject=LCCRO%20Pilot%20Project%20Application) with “LCCRO Pilot Project Application” in the subject line.

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| --- | --- | --- |
| ITEM | Limit |  |
| 1. Title | NA |  |
| 1. Key Personnel | NA |  |
| 1. Resubmission | NA |  |
| 1. Prior Funding | NA |  |
| 1. Overlap | NA |  |
| 1. Regulatory Approvals | NA |  |
| 1. Shared Resources | NA |  |
| 1. Lay Summary | 3-4 sentences |  |
| 1. Abstract | 1 page |  |
| 1. Leadership Plan | 1 page |  |
| 1. Specific Aims | 1 page |  |
| 1. Research Strategy | 5 pages |  |
| 1. Response to Reviewers (if applicable) | 1 page |  |
| 1. Literature Citations | NA |  |
| 1. Budget & Justification | 2 pages |  |
| 1. Approvals | NA |  |
| 1. [**NIH format Biosketches**](https://grants.nih.gov/grants/forms/biosketch.htm) for Key Personnel | 5 pages each |  |

**Applications are due by Noon on Monday, October 9, 2017**

Send by email as one complete PDF to [edward.north@uvm.edu](mailto:Edward.North@UVM.EDU?subject=LCCRO%202017%20Pilot%20APP)

[Return to Intramural Funding Web Portal](http://www.med.uvm.edu/uvmcancercenter/research/intramural-funding)

to consult Program Description & Guidelines