**FUNDING OPPORTUNITIES**

**NEW AND UPDATED:**

**NEW National Cancer Institute (NCI)/NIH/DHHS – Cancer Moonshot℠ Funding Opportunities** include 17 new funding opportunities that align with efforts of the Cancer Moonshot to accelerate research and make more therapies available to patients, while also improving the ability to prevent cancer and detect it at an early stage. Application due dates vary by program.

**UPDATED Duke (Doris) Charitable Foundation - Clinical Scientist Development Award** provides grants of up to $495,000 over 3 years to junior physician scientists to facilitate their transition to independent clinical research careers. It is recommended that applicants have significant research experience and strong publication records consistent with the assistant professor rank. Experiments that use animals or primary tissues derived from animals will not be supported by this program. The purpose of the award is to provide support to physician-scientists at the Assistant Professor rank to: 1) conduct clinical research, 2) enable research time protection to ease the tension between research and clinical responsibilities, and 3) facilitate development of strong research mentorship relations. Mandatory pre-proposals are due December 1, 2017.

**UPDATED American Association for Cancer Research (AACR)- Loxo Oncology Pediatric Cancer Research Fellowship** provides a two-year grant of $110,000 to support the salary and benefits of the fellow while working on a mentored pediatric cancer research project. A partial amount of funds may be designated for non-personnel expenses, such as research/laboratory supplies, equipment, publication charges for manuscripts that pertain directly to the funded project, and other research expenses. Applications are November 29, 2017 at 1:00 p.m. U.S. Eastern Time.

**NEW The Mary Kay Foundation** has invited one proposal from the University of Vermont for a two-year, $100,000 research grant in support of translational research in ovarian, uterine, breast or cervical cancer. Translational research is broadly defined as research that will provide a scientific link between laboratory research and the clinic. Ultimately, such research would lead to improvement in diagnosis, prognosis, prevention, or treatment of the cancer. This is a **LIMITED COMPETITION**, with only one candidate from UVM allowed. Please contact edward.north@uvm.edu by December 12, 2017 if you wish to apply. A brief research project summary will be required initially, and a full application from the selected candidate will be due to the Mary Kay Foundation by February 12, 2018. Please see more on this and other Limited Competitions at [http://www.uvm.edu/spa/?Page=findfunding_limitedcompetitions.html](http://www.uvm.edu/spa/?Page=findfunding_limitedcompetitions.html).

**UPDATED American Association for Cancer Research (AACR) - Conquer Cancer Foundation of ASCO Young Investigator Translational Cancer Research Award** provides $50,000 over one year to promising investigators to encourage and promote quality research in clinical oncology. The purpose of this jointly-supported award is to fund a physician-scientist during the transition from a fellowship program to a faculty appointment. Research projects are restricted to translational cancer research. Application deadline is December 12, 2017.

**UPDATED American Association for Cancer Research (AACR) - Conquer Cancer Foundation of ASCO Clinical and Translational Cancer Research Fellowships** provides $50,000 over one year to promising investigators to encourage and promote quality research in clinical oncology. The purpose of this jointly-supported award is to fund a physician-scientist during the transition from a fellowship program to a faculty appointment. Research projects are restricted to translational cancer research. Application deadline is December 12, 2017.
NEW American Association for Cancer Research (AACR) – Triple Negative Breast Cancer Foundation Research Fellowship provides a three-year grant of $165,000 to support the salary and benefits of the fellow while working on mentored triple negative breast cancer research. A partial amount of funds may be designated for non-personnel expenses, such as research/laboratory supplies, equipment, publication charges for manuscripts that pertain directly to the funded project, and other research expenses. Application deadline is December 13, 2017.

UPDATED Alex's Lemonade Stand Foundation for Childhood Cancer (ALSF) - Epidemiology Grants are two-year awards for up to $100,000 per year that are designed to support hypothesis-driven research that focuses on the epidemiology, early detection and prevention of childhood cancer or comparative effectiveness and outcomes research related to detection, prevention and treatment. Eligible areas of investigation using an epidemiological research approach include the following: Epidemiology and etiology of childhood cancer (identify subgroups at risk, cause and risk factors); Early Detection of childhood cancer (reduce disease severity and complications e.g. screening); Prevention of childhood cancer (prevent initial development of disease, e.g. immunization, reduce exposure); Comparative effectiveness and outcomes research (evaluate existing or new preventative/therapeutic measures to improve health outcomes for children with cancer or evaluate access to treatment) and Molecular epidemiology studies (identify contribution of potential genetic risk factors to late effects of treatment, within families and across populations). Applications are due December 15, 2017.

NEW Department of Defense (DOD)-U.S. Army Medical Research and Materiel Command (USAMRMC)-Office of Congressionally Directed Medical Research Programs (CDMRP) – announces FY17 Kidney Cancer Research Program (KCRP) funding opportunities with mandatory pre-application deadlines of 5:00 p.m. Eastern time (ET), December 20, 2017.

- Consortium Development Award - W81XWH-17-KCRP-CDA
- Idea Development Award - W81XWH-17-KCRP-IDA
- Concept Award - W81XWH-17-KCRP-CA
- Translational Research Partnership Award - W81XWH-17-KCRP-TRPA

NEW UVM Vice President for Research announces a Call for Proposals for the 2018 round of SPARK VT, a program designed to assist faculty members in translating innovative discoveries into the marketplace by supporting pilot projects. Emphasis will be placed on technologies that have the potential to advance rapidly into a commercialization pathway. The deadline for this year's competition is January 26, 2018. Please note that there are some changes to the process this year. Go to http://www.med.uvm.edu/sparkvt/proposals for more.

NEW National Cancer Institute (NCI)/NIH/DHHS - Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival - PAR-18-006 (Reissue of PAR 16-122 R01 Clinical Trial Optional) AND PAR-18-016 (Reissue of PAR-16-123 R21 Clinical Trial Optional) invite applications for transdisciplinary and translational research that will identify the specific biological or biobehavioral pathways through which physical activity and/or weight control (either weight loss or avoidance of weight gain) may affect cancer prognosis and survival. Research applications should test the effects of physical activity, alone or in combination with weight control (either weight loss or avoidance of weight gain), on biomarkers of cancer prognosis among cancer survivors identified by previous animal or observational research on established biomarkers other than insulin/glucose metabolism, especially those obtained from tumor tissue sourced from repeat biopsies where available. Application deadline for R01 is January 6, 2018 and for R21 deadline is January 16, 2018 after which standard dates apply for both. These programs expire September 8, 2018.

NEW National Cancer Institute (NCI)/NIH/DHHS - Improving Outcomes in Cancer Treatment-Related Cardiotoxicity: PA-18-003 (reissue of 116-035 R01 Clinical Trial Optional) AND PA-18-013 (R21 Clinical Trial Optional) encourage collaborative applications that will contribute to the identification and characterization of patients at risk of developing cancer treatment-related cardiotoxicity. The primary intent is to mitigate cardiovascular dysfunction while optimizing cancer outcomes. To accomplish this, methods that evaluate cardiac risk prior to treatment and integrate evidence-based cancer treatment regimens with screening, diagnostic, and/or management strategies are sought. Research
applications should focus on mitigation/management of adverse effects associated with anti-cancer treatments including: cytotoxic chemotherapies, targeted agents, immunomodulatory therapies and radiation (that occur during cancer treatment and/or long-term survivorship) as defined by cardiac specific common terminology criteria for adverse events (CTCAE). Application deadline for R01 is January 6, 2018 and for R21 deadline is January 16, 2018 after which standard dates apply for both. These programs expire January 8, 2019.

**UPDATED** American Gastroenterological Association (AGA) Caroline Craig Augustyn and Damian Augustyn Award in Digestive Cancer supports young investigators, instructors, research associates or equivalents conducting research relevant to the pathogenesis, prevention, diagnosis, or treatment of digestive cancer with a one-time $40,000 award. The award is intended to supplement existing career development funding. Physician/scientist investigators and candidates interested in translational research are especially encouraged to apply for this award. **Applications are due January 12, 2018.**

**NEW** Pancreatic Cancer Action Network - Translational Research Grant provides $500,000 over two years, with the potential to expand to a third year with additional funds, to support high priority pancreatic cancer research that is poised for important translational next steps to help move scientific discovery to application in patients. The research project should aim to identify novel targets and approaches to the treatment of pancreatic cancer or understand and circumvent treatment resistance. Of particular interest are research projects that fall into at least one of these three areas of research: a) Immune context and tumor microenvironment interactions, (b) Regulators of pathogenesis, progression and metabolism, with particular interest in epigenetic mechanisms and (c) Transcriptional networks essential for viability and maintenance of malignant phenotype. **Applications are due January 15, 2018.**

**American Society of Hematology - (ASH) Research Training Award for Fellows (RTAF) - Junior & Senior Investigator Awards** provide an opportunity for first-, second-, and third-year medical students to gain experience in hematology research under the mentorship of an ASH member and to learn more about the specialty. Awardees must agree to spend more than 80 percent of their time, during the immersive, year-long project, conducting laboratory, translational, or clinical hematology research. The awards provide recipients with $42,000 of funding for a one-year period. This includes $32,000 to support the trainee, $4,000 for research supplies, $4,000 for insurance and educational expenses (including one course), and $2,000 for meeting attendance (including the ASH annual meeting). The award is for a one-year period, generally July 1, 2018 through June 30, 2019. **Applications are due January 15, 2018.**

**NEW** National Cancer Institute (NCI)/NIH/DHHS - NCI Research Specialist Award - Laboratory-based Scientist: **PAR-18-341 (R50)** AND **PAR-18-342 Core-based Scientist (R50)** are designed to encourage the development of stable research career opportunities for exceptional scientists who want to continue to pursue research within the context of an existing NCI-funded basic, translational, clinical or population science cancer research program, but not serve as independent investigators. These scientists, such as researchers within a research program, are vital to sustaining the biomedical research enterprise. The Research Specialist Award is intended to provide salary support and sufficient autonomy so that individuals are not solely dependent on NCI grants held by others for career continuity. **Applications are due January 17, 2018, by 5:00 PM local time.**

**NEW** National Cancer Institute (NCI)/NIH/DHHS – Accelerating Colorectal Cancer Screening and follow-up through Implementation Science (ACCSIS): **RFA-CA-17-038 (UG3/UH3)** AND **RFA-CA-17-039 Coordinating Center (U24)** support research to establish an evidence base for multilevel interventions that increase rates of colorectal cancer (CRC) screening, follow-up, and referral-to-care, and best practices for how multilevel interventions can be scaled-up to reduce the burden of CRC on the United States (U.S.) population. The UG3 effort is to be used for the development of one-year, milestone-driven planning phase (UG3), with possible rapid transition to the second phase (UH3) for clinical trials. The ACCSIS Coordinating Center will facilitate coordination across the ACCSIS Research Projects (UG3/UH3 phased award supported under companion RFA-CA-17-038); provide administrative support to the ACCSIS Program; assist with identification and collection of common data elements; support the evaluation of locally-developed innovative approaches to increase CRC screening, follow-up, and referral-to-care rates; and develop and coordinate data sharing
Applications for both the UG3/UH3 and the U24 are due January 18, 2018, by 5:00 PM local time. These programs expire January 19, 2018.

**New National Cancer Institute (NCI)/NIH/DHHS – Program Project Applications PAR-18-290 (Reissue of PAR 16-457 P01 Clinical Trial Optional)** supports investigator-initiated Program Project (P01) applications. The proposed Program may address any of the broad areas of cancer research, including (but not limited to) cancer biology, cancer prevention, cancer diagnosis, cancer treatment, and cancer control. Basic, translational, clinical, and/or population-based studies in all of these research areas are appropriate. Each application submitted in response to this FOA must consist of at least three research projects and an Administrative Core. The projects must share a common central theme, focus, and/or overall objective. *Applications are due January 17, 2018 January 25, 2018 after which standard dates apply for both.* This program expires January 8, 2020.

**New National Cancer Institute (NCI)/NIH/DHHS – Assay Validation of High Quality Markers for Clinical Studies in Cancer: PAR-18-310 (reissue of PAR-15-096 UH3 Clinical Trials Not Allowed) AND PAR-18-317 (reissue of PAR-15-095 UH2/UH3 Clinical Trial Not Allowed)** support the validation of molecular/cellular/imaging markers and assays for cancer detection, diagnosis, prognosis, monitoring, and prediction of response or resistance to treatment, as well as markers for cancer prevention and control. This FOA also includes the validation of pharmacodynamic markers and markers of toxicity. Applicants should have assays that work on human samples and whose importance is well justified for development into clinical assays. As chemotherapies and/or radiation therapies are increasingly combined with immunotherapies to enhance durability of anti-cancer responses, multiple assays for measuring multiple markers, including immune markers, can be developed and validated simultaneously. The UH2 phase of this FOA supports analytical validation of assays for these markers that must be achieved within 2 years before assays may undergo clinical validation. The UH3 phase of this FOA supports clinical validation of established assays for up to 3 years using specimens from retrospective or prospective clinical trials or studies. *Applications for both are due February 14, 2018; July 10, 2018; October 8, 2018; February 13, 2019; July 10, 2019; October 8, 2019; February 13, 2020; July 10, 2020; October 8, 2020, by 5:00 PM local time.* These programs expire October 9, 2020.

**New Alex’s Lemonade Stand Foundation for Childhood Cancer (ALSF)** provides an opportunity for students to train with a mentor who is conducting research in the field of pediatric oncology during the summer break. Students may join a research project underway in a mentor’s lab or begin an original investigation with the mentor. A mentor/mentee pair is a prerequisite for applying. Although the mentor and the student should work together on the application, it should be submitted by the mentor via the ALSF website. A maximum of $5,000 will be awarded. The student must be able to dedicate at least eight full consecutive weeks to the program, typically between May 1 and August 31, 2018 (dates may vary depending on the student’s scheduled break). *Applications are due April 1, 2018 (11:59 PM ET).*

### November 2017

**National Cancer Institute (NCI)/NIH/DHHS – RFA-HL-18-023 Stimulating Access to Research in Residency (StARR) (R38)** supports recruitment and retention of outstanding, postdoctoral-level health professionals who have demonstrated potential and interest in pursuing careers as clinician-investigators. To address the growing need for this critical component of the research workforce, this funding opportunity seeks applications from institutional programs that can provide outstanding mentored research opportunities for Resident-Investigators and foster their ability to transition to individual career development research awards. The program will support institutions to provide support for up to 2 years of research conducted by Resident-Investigators in structured programs for clinician-investigators with defined program milestones. *Applications are due November 7, 2017, October 24, 2018, and October 24, 2019, by 5:00 PM local time (non-standard dates).*

**DeGregorio Foundation Award for Cancers of the Esophagus and Stomach** offers up to $250,000 over two years to promote research on the pathogenesis, early diagnosis, and treatment of upper gastrointestinal malignancies. This program supports high quality, innovative, and transformative translational and bench research to improve the
understanding of the biology of these diseases, identification of potential novel therapeutic targets, or in the development and evaluation of novel biomarkers for early diagnosis and treatment. Pre-clinical research, basic mechanistic studies, genomic/epigenomic studies, as well as epidemiologic studies may also be supported. The intention of this award is to provide seed funding for research in upper GI malignancies. Research projects must not be funded currently under a separate mechanism. Funded applicants are expected to apply for subsequent peer reviewed support (i.e. NIH or similar agency). **Applications are due November 7, 2017**

**AACR-Bristol-Myers Squibb Fellowships in Translational Immuno-oncology** provide $110,000 over two years to encourage and support postdoctoral or clinical research fellows to conduct innovative immuno-oncology research and to establish a successful career path in this field. **Applications are due November 8, 2017 by 1:00 PM EST.**

**Breast Cancer Research Foundation - AACR Career Development Award for Translational Breast Cancer Research Grants** provide $150,000 over two years and represent a joint effort to promote and support innovative research designed to accelerate the discovery, development, and application of new agents to treat breast cancer and/or for pre-clinical research with direct therapeutic intent. Funding permits salary and benefits of the grant recipient, postdoctoral or clinical research fellows, graduate students (including tuition costs associated with graduate students’ education and training) or research assistants; research/laboratory supplies; equipment; publication charges for manuscripts that pertain directly to the funded project; and other research expenses. **Applications are due November 9, 2017.**

**National Cancer Institute (NCI)/NIH/DHHS – PAR 15-334 Development of Innovative Informatics Methods and Algorithms for Cancer Research and Management (R21)** supports the development of innovative methods and algorithms in biomedical computing, informatics, and data science addressing priority needs across the cancer research continuum, including cancer biology, cancer treatment and diagnosis, cancer prevention, cancer control and epidemiology, and/or cancer health disparities. As a component of the NCI’s Informatics Technology for Cancer Research (ITCR) Initiative, this FOA encourages applications focused on the development of novel computational, mathematical, and statistical algorithms and methods that can considerably improve acquisition, management, analysis, and dissemination of relevant data and/or knowledge. The central mission of ITCR is to promote research-driven informatics technology across the development lifecycle to address priority needs in cancer research. In order to be successful, the proposed informatics method or algorithm must have a clear rationale on why it is novel and how it will benefit the cancer research field. **Next deadline is November 20, 2017** with subsequent deadlines of May 14, 2018 and June 14, 2018.

**AACR Lung Cancer Research Fellowships** provide $110,000 over two years to support postdoctoral or clinical research fellows in conducting lung cancer research and establishing a successful career path in this field. The research proposed for funding may be basic, translational, clinical, or epidemiological in nature and must have direct applicability and relevance to lung cancer. **Applications are due November 14, 2017 by 1:00 PM EST.**

**National Cancer Institute (NCI)/NIH/DHHS - RFA-CA-17-049 Fusion Oncoproteins in Childhood Cancers (FusOnC2) Consortium (U54)** seeks to establish a consortium of collaborating research teams to advance our understanding of the biology and mechanisms of action of fusion oncoproteins in pediatric cancers, and to apply this knowledge towards developing targeted therapeutic approaches. **Applications are due November 15, 2017, by 5:00 PM local time**.

**Cancer Research Institute (CRI) – Technology Impact Award** provides seed funding of up to $200,000 to be used over 12-24 months to address the gap between technology development and clinical application of cancer immunotherapies. These grants aim to encourage collaboration between technology developers and clinical cancer immunologists and to generate the proof-of-principle of a novel platform technology in bioinformatics, ex vivo or in silico modeling systems, immunological or tumor profiling instrumentation, methods, reagents and assays, or other relevant technologies that can enable clinician scientists to generate deeper insights into the mechanisms of action of effective or ineffective cancer immunotherapies. **Letters of Intent are due by November 15, 2017.** Selected applicants will be invited to submit a full research proposal with a submission deadline of March 15, 2018. Award winners will be announced on or around June 1, 2018.
AACR Fellowships in Lymphoma Research awarded at $110,000 over two-years, represent a joint effort to encourage and support postdoctoral or clinical research fellows to conduct lymphoma research and to establish a successful career path in this field. The research proposed for funding may be basic, translational, clinical, or epidemiological in nature and must have direct applicability and relevance to lymphoma. Research projects may be basic, clinical, translational, or epidemiological in nature and must have direct applicability and relevance to lymphoma. Applications are due November 16, 2017 by 1:00 p.m. U.S. Eastern Time.

National Cancer Institute (NCI)/NIH/DHHS - PAR-16-385 Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine (U24) supports development of research resources that will encourage a consensus on how Quantitative Imaging (QI) methods are optimized to improve correlation of results for co-clinical trials. The scientific goals of this FOA are to: (a) perform the appropriate optimization of the pre-clinical quantitative imaging methods, (b) implement the optimized methods in the co-clinical trial, and finally (c) populate a web-accessible research resource with all the data, methods, workflow documentation, and results collected from the co-clinical investigations. Co-clinical trials are defined in this FOA as investigations in patients and in parallel (or sequentially) in mouse or human-in-mouse models of cancer that mirror the genetics and biology of the patients’ malignancies or pre-cancerous lesions. The co-clinical trial should include either (a) a therapeutic goal, such as the prediction, staging, and/or measurement of tumor response to therapies, or (b) a screening and early detection or a cancer risk stratification goal for lethal cancer versus non-lethal disease. Applicants are encouraged to organize multi-disciplinary teams with experience in mouse models research, human investigations, imaging platforms, QI methods, decision support software and informatics to populate the research resource. Applications are due November 17, 2017, and June 14, 2018, by 5:00 PM local time of applicant organization (non-standard dates).

National Cancer Institute (NCI)/NIH/DHHS – Sustained Support for Informatics Resources for Cancer Research and Management - PAR-15-331 (U24), PAR-15-332 (U01), PAR-15-333 (U24), & PAR-15-334 (R21) seek to enable informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge across the cancer research continuum including cancer biology, cancer treatment and diagnosis, cancer prevention, cancer control and epidemiology, and/or cancer health disparities. The central mission of ITCR is to promote research-driven informatics technology across the development lifecycle to address priority needs in cancer research. In order to be successful, proposed development plans must have a clear rationale on why the proposed technology is needed and how it will benefit the cancer research field. Applications for all these programs are due November 20, 2017, June 14, 2018, and November 20, 2018 by 5:00 PM local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process.

Department of Defense (DOD)-U.S. Army Medical Research and Materiel Command (USAMRMC)-Office of Congressionally Directed Medical Research Programs (CDMRP) - FY17 Breast Cancer Research Program (BCRP):

- Era of Hope Scholar Award II - W81XWH-17-BCRP-EOHSS2 Pre-Application Submission Deadline: 5:00 p.m. Eastern time (ET), November 21, 2017
- Breakthrough Award Levels 1 and 2 II - W81XWH-17-BCRP-BREAKTHROUGH2-FL12 Pre-Application Submission Deadline: 5:00 p.m. Eastern time (ET), November 21, 2017
- Breakthrough Fellowship Award II - W81XWH-17-BCRP-BREAKTHROUGH-FELLOWSHIP2 Pre-Application Submission Deadline: 5:00 p.m. Eastern time (ET), November 21, 2017

National Cancer Institute (NCI)/NIH/DHHS – Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention PAR-15-307 U01, PAR-15-308 R01, & PAR-15-309 R21 encourage research projects focused on adducts to cellular macromolecules as indicators of exposures to cancer risk factors relevant to human populations. The priority is on projects that will focus on adductomic approaches, i.e., address some aspects of the totality of adducts. These projects should explore the basic aspects of adducts/adductomics that may have a potential utility in cancer detection, cancer prevention, and/or assessing cancer risks. The projects should be relevant to adducts in humans and human populations but may be conducted using various model systems (e.g., cultured cells, animals, etc.). The use of human
biospecimens is encouraged and expected if appropriate but not required. Applications are due November 21, 2017, with one subsequent deadline of July 11, 2018.

**National Cancer Institute (NCI)/NIH/DHHS – Image-guided Drug Delivery (R01)** supports innovative research projects that are focused on image-guided drug delivery (IGDD), including real-time image guidance, monitoring, quantitative in vivo characterizations and validation of delivery and response. It will support research in development of integrated imaging-based systems for delivery of drugs or biologics in cancer and other diseases, quantitative imaging assays of drug delivery, and early intervention. Next deadline is November 22, 2017 with subsequent deadlines of June 21, 2018 and November 22, 2018.

**National Cancer Institute (NCI)/NIH/DHHS – Electronic Nicotine Delivery Systems (ENDS): Population, Clinical and Applied Prevention Research** support studies on electronic nicotine delivery systems (ENDS) that examine population-based, clinical and applied prevention of disease, including etiology of use, epidemiology of use, potential risks, benefits and impacts on other tobacco use behavior among different populations. Applications are due November 27, 2017, by 5:00 PM local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. These programs expire November 28, 2017 but FOAs will be reissued for additional due date(s) on or after January 25, 2018.

**National Cancer Institute (NCI)/NIH/DHHS – Electronic Nicotine Delivery Systems (ENDS): Basic Mechanisms of Health Effects** encourage research evaluating the biological mechanisms whereby ENDS aerosols affect the normal and disease states relevant to human cells, tissues or organs. Studies of interest include understanding the characteristics of ENDS aerosols and how they are generated. Also of interest is how ENDS-specific constituents alter molecular, cellular and physiological pathways important in maintaining normal homeostatic functions or progression to disease states. Studies should make use of human cells or specimens, and where appropriate, can utilize cell or animal models that are relevant to humans and well justified. Applications should focus on constituents or aerosols unique to ENDS products; studies examining ENDS components that have been well-studied in other tobacco products or other health contexts are not high priority unless there is a unique aspect to ENDS exposure. Consideration should be given to the development of biomarkers that reflect exposure to ENDS aerosol and could provide information on the risks or benefits of exposure. Applications are due November 27, 2017; June 27, 2018; October 24, 2018; June 27, 2019; October 24, 2019; and June 27, 2020, by 5:00 PM local, by 5:00 PM local time, (non-standard dates). Program expires on June 28, 2020.

**National Cancer Institute (NCI)/NIH/DHHS – NCI Outstanding Investigator Award (R35)** provides long-term support to accomplished investigators with outstanding records of cancer research productivity who propose to conduct exceptional research. The OIA allows investigators the opportunity to take greater risks, be more adventurous in their lines of inquiry, or take the time to develop new techniques. The OIA would allow an Institution to submit applications nominating established Program Directors/Principal Investigators (PDs/PIs) for the NCI OIA. The OIA provides extended funding stability and encourage investigators to embark on projects of unusual potential in cancer research. The research projects should break new ground or extend previous discoveries toward new directions or applications that may lead to a breakthrough that will advance biomedical, behavioral, or clinical cancer research. Applications are due November 28, 2017, by 5:00 PM local time (non-standard date). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process.

**DECEMBER 2017**

**Damon Runyon Cancer Research Foundation Clinical Investigator Award** provides $450,000 over three years, plus up to $100,000 for outstanding medical school loans, to provide outstanding young physicians with the resources and training structure essential to becoming successful clinical investigators. The goal is to increase the number of physicians capable of moving seamlessly between the laboratory and the patient’s bedside in search of breakthrough treatments. The
applicant must apply in conjunction with a mentor who is established in the field of clinical translational cancer research, cancer prevention and/or epidemiology and who can provide the critical guidance needed during the period of the award. No more than two Damon Runyon Clinical Investigators will be funded to work with the same Mentor at any given time. An 80% time commitment for patient-oriented research is also required and in vitro studies that utilize human tissues but do not deal directly with patients are not eligible. This is a LIMITED COMPETITION, with no more than five candidates per institution permitted. Please contact edward.north@uvm.edu by December 1, 2017 if you wish to apply. Applications are due to the foundation on February 1, 2018.

Marsha Rivkin Center for Ovarian Cancer Research Pilot Study Program supports Pilot Study Program awards to be allocated based on scientific merit. One-year awards at $75,000 each, Pilot Study Program awards will support investigator-initiated projects in all areas of ovarian cancer research. In addition, projects designed to analyze data from already funded clinical trials will be considered. Applications are due December 1, 2017 by 5PM Eastern Time.

Marsha Rivkin Center for Ovarian Cancer Scientific Scholar Awards support two-year grants at $120,000 each, Scientific Scholar Awards are intended to assist promising laboratory and clinical scientists in pursuing a career as an independent investigator in ovarian cancer research. Applications are due December 1, 2017 by 5PM Eastern Time.

Damon Runyon Cancer Research Foundation Physician-Scientist Training Award provides $460,000 over four years to support independent young physician-scientists conducting disease-oriented research that demonstrates a high level of innovation and creativity. The goal is to support the best young physician-scientists doing work aimed at improving the practice of cancer medicine. Postdoctoral fellows, clinical fellows, and clinical instructors are eligible to apply. If the Awardee transitions to an assistant professorship appointment (or equivalent) during the award term, he/she must terminate the award. Candidates must apply with a Mentor who will foster the development of the applicant’s knowledge, technical and analytical skills, and capacity for scientific inquiry in the field of basic or translational research chosen by the candidate and in which the Mentor is an outstanding figure. The Mentor will also serve as an advocate for the applicant at departmental, institutional, and other relevant professional levels. Applications are due December 1, 2017.

National Cancer Institute (NCI)/NIH/DHHS - RFA-CA-17-041--Approaches to Identify and Care for Individuals with Inherited Cancer Syndromes (U01) is associated with the Beau Biden Cancer MoonshotSM Initiative that is intended to accelerate cancer research. The purpose of this FOA is to increase case ascertainment and optimize delivery of evidence-based healthcare for individuals at high risk of cancer due to an inherited genetic susceptibility. Specifically, this FOA targets the following area designated as a scientific priority by the Blue Ribbon Panel (BRP) Recommendation E: “To realize the potential of cancer prevention and early detection in our nation, NCI should sponsor an initiative to improve the current state of early detection, genetic testing, genetic counseling, and knowledge landscape of the mechanisms and biomarkers associated with cancer development. This initiative should include demonstration projects that will show how cancer screening programs can simultaneously save lives, improve quality of life, and reduce healthcare costs.” Optional Letters of Intent are due December 9, 2017. Full applications are due January 9, 2018, by 5:00 PM local time.

National Cancer Institute (NCI)/NIH/DHHS - PAR-16-089 Imaging and Biomarkers for Early Detection of Aggressive Cancer (U01) The purpose of this Funding Opportunity Announcement (FOA) is to: to: (i) invite researchers to submit collaborative research project (U01) applications to improve cancer screening, early detection of aggressive cancer, assessment of cancer risk and cancer diagnosis aimed at integrating multi-modality imaging strategies and multiplexed biomarker methodologies into a singular complementary approach, and (ii) establish a Consortium for Imaging and Biomarkers (CIB) to perform collaborative studies, exchange information, share knowledge and leverage common resources. The research will be conducted by individual multi-disciplinary research teams, hereafter called Units. All Units are expected to participate in collaborative activities with other Units within the Consortium. Applications are due December 11, 2017 with subsequent deadlines until December 11, 2018.
American Head and Neck Society (AHNS) Pilot Grants, awarded at $10,000 for one-year, support basic, translational, or clinical research projects in head and neck oncology. Clinical or translational research studies are strongly encouraged and should be specifically related to the prevention, diagnosis, treatment, outcomes, or pathophysiology of head and neck neoplastic disease and may be either basic or clinical/translational in approach. Mandatory Letter of Intent is due December 15, 2017 with full application due January 16, 2018.

Alex's Lemonade Stand Foundation for Childhood Cancer (ALSF) Young Investigator Awards provide up to $50,000 per year over three-years and are designed as start-up funds for new scientists at the end of their fellowship training or early in their research career. Demonstration of outstanding mentorship and demonstration of a career plan that shows commitment to pediatric cancer investigation are critical components of a successful application. Medical grant applications in psychosocial aspects of pediatric cancer will not be considered. Applications are due December 15, 2017 (11:59 PM ET).

Alex's Lemonade Stand Foundation for Childhood Cancer (ALSF) Innovation Grants provide up to $125,000 per year over two-years and are designed as seed funding for researchers with a novel approach to pediatric oncology scientific investigation. This may represent a change in research direction and/or an innovative new idea that moves away from an investigator's prior research but for which a strong case is made for the potential impact on childhood cancers. Innovation Grants will support research proposals to be carried out by investigators who are already established, have a track record of peer-reviewed publications and evidence of successfully competing for extramural funding. Mandatory Letters of Intent are due December 15, 2017. Full applications are due April 2, 2018.


National Cancer Center (NCC) Fellowship Program has established two-year funding at $40,000 for the first year and $42,000 for the second for a limited number of postdoctoral fellowships for qualified applicants to receive training and experience in molecular genetics and the cellular aspects of cancer biology and tumor immunology. Preference will be given to studies that have direct relevance to the diagnosis and treatment of human cancer. Funding is also available for post-doctoral fellowships in children's cancer research, including fighting children's leukemia. Applications are due December 18, 2017.

National Cancer Institute (NCI)/NIH/DHHS - Pediatric Immunotherapy Discovery and Development Network RFA-CA-17-050 (U54) & RFA-CA-17-051 (U01) are associated with the Beau Biden Cancer MoonshotSM Initiative that is intended to accelerate cancer research. The purpose of this FOA is to increase case ascertainment and optimize delivery of evidence-based healthcare for individuals at high risk of cancer due to an inherited genetic susceptibility. The purpose of this FOA is to establish Centers of collaborating investigators with the goal of identifying and advancing research opportunities for translating immunotherapy concepts for children and adolescents with cancer toward clinical applications. Specifically, this FOA targets the following area designated as a scientific priority by the Blue Ribbon Panel (BRP): Recommendation (B) that calls for the establishment of a pediatric immunotherapy translational science network. The network was envisioned by the BRP as focusing on identifying new targets for immunotherapies, developing new pediatric immunotherapy treatment approaches (e.g., cancer vaccines, cellular therapy, combinations of immunotherapy agents, and others), and defining the biological mechanisms by which pediatric tumors evade the immune system. Applications are due December 19, 2017, by 5:00 PM local time.

American Lung Association (ALA) offers multiple funding opportunities with December 21, 2017 deadlines, for many of which research priorities include lung cancer and smoking cessation:

- Alpha-1 Grant: $40,000/yr.
- Lung Cancer Discovery Award: $100,000/yr. (deadline for mandatory letter of intent has passed)
- American Lung Association / AAAAI Allergic Respiratory Diseases Award: $75,000/yr.
- Biomedical Research Grant: $40,000/yr.
- Clinical Patient Care Research Grant: $40,000/yr.
• Dalsemer Research Grant: $40,000/yr.
• Social-Behavioral Research Grant: $40,000/yr.
• Senior Research Training Fellowship: $32,500/yr.
• Lung Health Dissertation Grant: $21,000/yr.

JANUARY 2018

National Cancer Institute (NCI)/NIH/DHHS – "High" or "Medium" Priority AIDS Research on Non-AIDS-defining or AIDS-defining Cancers, PA-16-426 (R01) and PA-16-425 (R21) seeks to advance our understanding of the risks, development, progression, diagnosis, and treatment of malignancies observed in individuals with an underlying human immunodeficiency (HIV) infection or acquired immunodeficiency syndrome (AIDS), particularly the non-AIDS defining malignancies which are now a leading cause of death in HIV-infected individuals. This FOA encourages high or medium priority AIDS research in areas such as the study of the etiologic factors, cofactors, immunopathogenesis, diagnosis, and consequences of both non-AIDS defining and AIDS-defining malignancies in populations with an underlying HIV infection. This FOA encourages research efforts that will (i) identify specific contributions resulting from HIV infection and its potential interaction with other pathogens for the development and pathogenesis of these cancers and (ii) provide information on the clinical outcomes of such cancers in the HIV-infected population. Applications for both R01 and R21 are due January 7, 2018, May 7, 2018, September 7, 2018, January 7, 2019, May 7, 2019 and September 7, 2019 (standard AIDS dates) by 5:00 pm local time. Program expires September 8, 2019.

Sarcoma Alliance for Research Through Collaboration (SARC) Career Development Awards, at $100,000 for one year, support the ideas and work of investigators that complement the depth of sarcoma translational research and to help ensure the continual renewal of high-quality scientific endeavors in the SARC Sarcoma SPORE. Applications must address bench-to-bedside/bedside-to-bench strategies and have the ability to spend at least 50% effort dedicated to research. The research focus should be in the area of sarcoma. Letters of Intent are due January 8, 2018 with full proposals due March 26, 2018.

National Heart, Lung, and Blood Institute/NIH/DHHS RFA-HL-18-021--Consortium Linking Oncology with Thrombosis (CLOT) (U01) provides up to $500,000 per year for up to five-years to encourage studies in selected cancer types that expand mechanistic investigation into the intersection between cancer and thrombotic pathways; and apply mechanistic insights towards the identification and development of biomarkers of thrombotic risk or cancer progression and new strategies for preventing or treating the deleterious interplay between cancer, cancer therapy, and hemostasis/thrombosis. Applications are due January 8, 2018.

American Association of Immunologists (AAI) Travel Awards and Grants recognize the promise and bolster the professional development of investigators of all career stages by assisting them with travel to the AAI annual meeting and travel to learn a new technique. Deadline for 2018 Travel Award applications is January 9, 2018.

National Cancer Institute (NCI)/NIH/DHHS – Quantitative Imaging Tools and Methods for Cancer Response Assessment, PAR-17-128 (UG3/UH3) and PAR-17-129 (R01) support research organizations interested in clinically translating already optimized quantitative imaging software tools capable of measuring or predicting the response of cancer to clinical therapies, or in translating imaging tools for planning and validating radiation therapy treatment strategies in clinical trials. The quantitative tools must have been developed and optimized during a performance period in the Quantitative Imaging Network (QIN) or under other separate funding. The proposed research effort should be an extension of the research that successfully completed the tasks of developing and optimizing the chosen software tools or data collection methods intended to facilitate clinical decision making during clinical trials. This FOA is intended to support the efforts of validating those tools in prospective multisite clinical trials in order to test tool performance and to demonstrate that the tool can be integrated into clinical workflow with a minimum of disruption. Applications for
both R01 and UG3/UH3 are due January 9, 2018; May 9, 2018; September 12, 2018; January 9, 2019; May 9, 2019; September 12, 2019; and January 9, 2020, by 5:00 PM local time (non-standard dates). Program expires January 10, 2020.

American Society of Hematology (ASH) Research Training Award for Fellows (RTAF) - Junior Investigator Award is designed to encourage junior researchers in hematology, hematology/oncology, or other hematology-related training programs to pursue a career in academic hematology. The RTAF awards $70,000 to fellows in training so they will have protected time for research and is to be used primarily for salary support for the applicant. Applications are due January 15, 2018.

American Academy of Dermatology Lila and Murray Gruber Memorial Cancer Research Award and Lectureship provides a $10,000 cash award in recognition of lifetime achievements by a physician or non-physician scientist in the field of cancer research. Nominations are due by January 15, 2018.

National Cancer Institute (NCI)/NIH/DHHS – Immuno-Oncology Translation Network (IOTN) is associated with the Beau Biden Cancer MoonshotSM Initiative to accelerate cancer research. Specifically, this FOA targets Recommendation B to create a translational science network devoted exclusively to immunotherapy approaches to treat and prevent adult cancers. The goal of the network is to foster collaborative team science approaches to accelerate the discovery of new immune targets and evaluate novel immune-based therapies and combination approaches that eliminate established cancers in adults or to prevent cancers before they occur through the following programs:

- **Cancer Immunotherapy Research Projects** RFA-CA-17-045 (U01) to establish a Cancer Immunotherapy Consortium (CIC) composed of organ site-specific Cancer Immunotherapy Research Projects as a component of the Immuno-Oncology Translation Network (IOTN);
- **Cancer Immunoprevention Research Projects** RFA-CA-17-046 (U01) to establish Cancer Immunoprevention Research Projects that will function as components of a Cancer Immunotherapy Consortium (CIC), which will also include Cancer Immunotherapy Research Projects;
- **Data Management and Resource-Sharing Center (DMRC)** RFA-CA-17-047 (U24) to foster collaborative team science approaches to accelerate the discovery of new immune targets and evaluate novel immune-based therapies and combination approaches that eliminate established cancers in adults or to prevent cancers before they occur; and
- **Cellular Immunotherapy Data Resource (CIDR)** RFA-CA-17-048 (U24) to establish a Data Resource associated with clinical trials in cellular immunotherapy as a component of the Immuno-Oncology Translation Network (IOTN).

Applications for all four programs are due January 16, 2018 by 5:00 PM local time (non-standard date). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process. Program expires January 17, 2018.

National Cancer Institute (NCI)/NIH/DHHS – Inter-organelle Communication in Cancer PAR-17-203 (R01) AND PAR-17-204 (R21) support research projects that examine how inter-organelle communication in cancer cells and/or tumor-associated cells affects cellular function, adaptation, and phenotypic plasticity. Applications for both R01 and R21 are due January 17, 2018; August 15, 2018; January 16, 2019; August 14, 2019; January 15, 2020, by 5:00 PM local time (non-standard dates). Program expires January 16, 2020.

National Cancer Institute (NCI)/NIH/DHHS – RFA-CA-17-052 Analyzing and Interpreting Clinician and Patient Adverse Event Data to Better Understand Tolerability (U01) This Funding Opportunity Announcement (FOA) is associated with the Beau Biden Cancer Moonshot InitiativeSM that is intended to accelerate cancer research. The purpose of this FOA is to promote research on developing the descriptive, inferential, and graphical statistical methods for data generated in clinical trials including Patient-Reported Outcomes version of the Common Terminology Criteria for Adverse Events (PRO-CTCAE™) items. Specifically, this FOA targets the following area designated as a scientific priority by the Blue
Ribbon Panel (BRP): Accelerate research that can identify approaches to monitor and manage patient-reported symptoms. Deadline is January 17, 2018, by 5:00 PM local time.

**National Cancer Institute (NCI)/NIH/DHHS - RFA-CA-17-029 Precompetitive Collaboration on Liquid Biopsy for Early Cancer Assessment (U01)** seeks to establish an Academic-Industrial Partnership Program to develop new and/or validate existing technologies, methods, and assays for the capture and quantification of tumor associated cells, DNA, RNA, or exosomes in body fluids of patients with early stage disease or those at high risk; as well as distinguishing cancer from benign disease; or aggressive from indolent cancers. The precompetitive alliances with industry will harmonize and validate technologies, methods and assays associated with liquid biopsies. **Applications are due January 23, 2018, by 5:00 PM local time.** Program expires January 24, 2018.

**National Cancer Institute (NCI)/NIH/DHHS – PAR-16-457 National Cancer Institute Program Project Applications (P01)** supports research addressing any of the broad areas of cancer research, including (but not limited to) cancer biology, cancer prevention, cancer diagnosis, cancer treatment, and cancer control. Basic, translational, clinical, and/or population-based studies in all of these research areas are appropriate. Each application must consist of at least three research projects and an Administrative Core. The projects must share a common central theme, focus, and/or overall objective. Next Application deadline is January 25, 2018 after which standard NIH due dates apply until program expiration as of January 8, 2020.

**Cancer for College General Scholarships** provide college scholarships to any cancer survivor who is enrolled in an accredited college or university in the United States. **Applications are due by January 31, 2018.**

**National Institute on Drug Abuse (NIDA)/NIH/DHHS - PAR-17-458 Population Assessment of Tobacco and Health (PATH) Biospecimen Access (X01)** provides the scientific community with biospecimens (urine, plasma, and serum) and related research data on behaviors, attitudes, biomarkers and health outcomes associated with tobacco use in the U.S. This opportunity allows investigators to apply for access to the biospecimens from the PATH Study. Information about the PATH Study and this resource may be found on the PATH Study series page at the University of Michigan’s National Addiction & HIV Data Archive Program (NAHDAP) website, part of the Inter-University Consortium for Political and Social Research’s (ICPSR) website ([https://doi.org/10.3886/Series606](https://doi.org/10.3886/Series606)). **Applications are due January 31, 2018, July 31, 2018, January 31, 2019, January 31 2020, and July 31, 2020, by 5:00 PM local time (non-standard dates).**

**FEBRUARY 2018**

**Childs (Jane Coffin) Memorial Fund Fellowship Awards** provide approximately $165,000 over three-years to highly qualified scientists pursuing research into the causes and origins of cancer. Dependent Child & Child Care support are also provided for qualified candidates. Postdoctoral applicants should have no more than one year of postdoctoral research experience at the time of the deadline for submitting applications; PhD degree must not have been conferred more than 18 months prior to the deadline date; MD degree should not have been conferred more than three years before deadline date of application; PhD. candidates that do not have their degree at time of application deadline are eligible to apply. If awarded, the applicant’s PhD. degree must be conferred prior to the start of the Fellowship. **Applications are due February 1, 2018.**

**National Cancer Institute (NCI)/NIH/DHHS PAR-18-324 Testing Interventions for Health-Enhancing Physical Activity (R01 - Clinical Trial Optional) (Reissue of PAR-14-315)** (see also companion Funding Opportunity PAR-18-307, R21/R33) encourages innovative research to improve our understanding of how to increase and maintain health-enhancing physical activity using multi-level interventions. Applicants should use the Socio-Ecological Model as a framework and should test multi-level interventions targeting at least two levels of the model. Interventions to be tested should seek to increase participants' progression toward achieving the physical activity recommendation appropriate to the participants' health, abilities, and conditions. This FOA also seeks studies that address a wide range of population groups across the lifespan (e.g., racial and ethnic minorities, children, older adults, persons with medical conditions or addictive disorders, and persons with disabilities). Investigators are encouraged to build on prior research to refine evidence-
based physical activity interventions and to make use of innovative partnerships within and across sectors as needed to study the implementation and outcomes of the proposed intervention. Applications are due February 5, 2018; October 5, 2018; June 5, 2019; February 5, 2020; October 5, 2020, by 5:00 PM. Program expires January 8, 2021. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

**NATIONAL CANCER INSTITUTE (NCI)/NIH/DHHS – PA-17-495 Multilevel Interventions in Cancer Care Delivery: Follow-up to Abnormal Screening Tests (R01 Clinical Trial Optional)** encourages applications that develop and test multilevel interventions to improve follow-up to abnormal screening tests for breast, cervical, colorectal, or lung cancers. Improving follow-up to abnormal screening tests is dependent on factors at the patient, provider, clinical team, clinic, healthcare institution, or community setting levels. Appropriate applications for this FOA should propose to intervene at two or more levels, and measure outcomes at three or more levels, while accounting for interactions that occur between and across levels. Next Application deadline is February 5, 2018 after which standard NIH due dates apply until program expiration as of January 8, 2021.

**National Cancer Institute (NCI)/NIH/DHHS - PAR-17-438 R01 Assay development and screening for discovery of chemical probes or therapeutic agents** to stimulate research in 1) discovery and development of novel, small molecules for their potential use in studying disease treatment relevant to the missions of the participating NIH Institutes, and 2) generation of new insight into the biology of relevant diseases and processes that have yet to be validated as important drug targets. Next Application deadline is February 5, 2018 after which standard NIH due dates apply until expiration on May 8, 2019.

**National Cancer Institute (NCI)/NIH/DHHS Gene Fusions in Pediatric Sarcomas PA-16-251 R01** (see also companion funding opportunity PA-16-252 R21) seeks research grant applications to investigate the molecular mechanisms by which oncogenic fusion genes and their gene products contribute to pediatric sarcoma initiation, progression, and metastasis. Better understanding of the molecular pathways activated by chromosomal translocations in pediatric sarcomas, and their relationship to oncogenesis and tumor progression, can elucidate mechanisms of cancer pathogenesis and potentially lead to novel therapeutics. Next Application deadline is February 5, 2018 after which standard NIH due dates apply until expiration on September 8, 2020.

**National Cancer Institute (NCI)/NIH/DHHS - PA-17-440 The Interplay of Cell Death Pathways in Cancer Cell Survival and Resistance to Therapy (R01)** supports research in the interplay between cell death pathways in naïve and drug resistant cancers. Regulated cell death, especially apoptosis and necroptosis, are natural barriers that restrict malignant cells from surviving and disseminating. Evasion of cell death mechanisms is one of the hallmarks of cancer contributing to tumor progression, metastases and resistance to therapy. Recent studies show that the machinery to activate different forms of cell death coexists in cells but the crosstalk of cell death pathways in cancer has not been systematically studied. Research into the intersection of cell death programs will allow for better defining markers of cell death pathway at the molecular level and offers the possibility that the specific mediators of cell survival may be inhibited and/or the mediators of cell death enhanced, driving naïve and drug resistant cancer cells toward effective cell death. Next Applications are due February 5, 2018 after which standard NIH due dates apply until expiration on September 8, 2020.

**National Cancer Institute (NCI)/NIH/DHHS – Integration of Individual Residential Histories into Cancer Research PA-17-298 (R01)** (see also companion funding opportunity PA-17-295 R21) supports investigation of the role of individual residential histories in cancer etiology and outcomes, and to encourage the development of complex analytical strategies in support of substantive investigation. This FOA is suitable for projects where proof-of-principle of the proposed technology or methodology has already been established and supportive preliminary data are available. R01 Applications are due February 5, 2018 after which standard NIH due dates apply until expiration on September 8, 2020.

**National Cancer Institute (NCI)/NIH/DHHS Cancer-Related Behavioral Research Through Integrating Existing Data R01 PAR-16-256** (see also companion funding opportunity R21 PAR-16-255) seeks to integrate two or more independent
data sets to answer novel cancer control and prevention questions. Research should apply Integrative Data Analysis (IDA) methods to existing data sources that study behavioral risk factors for cancer, including tobacco use, sedentary behavior, poor weight management, and lack of medical adherence to screening and vaccine uptake. R01 applications are due February 7, 2018; June 7, 2018; February 7, 2019; and June 7, 2019, by 5:00 PM local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process. Program Expires June 8, 2019.

**National Cancer Institute/NIH/DHHS** **PA-17-110 R01** **Reducing Overscreening for Breast, Cervical, and Colorectal Cancers among Older Adults (R01)** (see also companion funding opportunity **PA-17-109 R21**) supports research on interventions, based in healthcare settings, designed to reduce overscreening. R01 Applications are due February 5, 2018 after which **standard NIH due dates** apply until expiration January 8, 2020.

**National Cancer Institute (NCI)/NIH/DHHS** **PAR-16-338 (R01)** - **Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake** (see also companion funding opportunities **PAR-16-337 R03**, and **PAR-16-336 R21**) supports research on how the healthcare delivery system enhances or inhibits the effectiveness of a provider's recommendation of the adolescent human papillomavirus (HPV) vaccine. Characteristics of the provider, parent/patient, and clinical setting, can all affect whether a provider makes a recommendation, and whether that recommendation results in uptake of the HPV vaccine. This research requires expertise in cancer prevention, adult and childhood behavior, immunization promotion, and healthcare delivery. **R01 Applications are due February 5, 2018 after which standard NIH due dates apply until expiration July 6, 2020.**

**National Institute of Mental Health/NIH/DHHS** - **PAR-17-336 Discovery of in vivo Chemical Probes for Novel Brain Targets (R01)** (see also companion funding opportunity **PAR-17-335 R21**) supports investigators who have interest and capability to join efforts for the discovery of in vivo chemical probes for novel brain targets. It is expected that applicants will have in hand the starting compounds ("validated hits") for chemical optimization and bioassays for testing new analog compounds. **R01 Applications are due February 5, 2018 after which standard NIH due dates apply until expiration September 8, 2020.**

**National Cancer Institute (NCI)/NIH/DHHS** - **PAR-17-438 Assay development and screening for discovery of chemical probes or therapeutic agents (R01)** to stimulate research in 1) discovery and development of novel, small molecules for their potential use in studying disease treatment relevant to the missions of the participating NIH Institutes, and 2) generation of new insight into the biology of relevant diseases and processes that have yet to be validated as important drug targets. **R01 Applications are due February 5, 2018 after which standard NIH due dates apply until expiration on May 8, 2019.**

**National Cancer Institute (NCI)/NIH/DHHS** **RFA-OD-17-013 Tobacco Regulatory Science (R01)** (see also companion funding opportunities **RFA-OD-17-012 (R03)** and **RFA-OD-17-014 (R21)**) support biomedical and behavioral research that will provide scientific data to inform regulation of tobacco products to protect public health. Research Projects must address the research priorities related to the regulatory authority of the Food and Drug Administration (FDA) Center for Tobacco Products (CTP). Science will inform the FDA in regulation of the manufacture, marketing, and distribution of tobacco products in order to reduce the public health toll from tobacco product use in the United States. Only applications proposing research relevant to one or more of the following areas will be considered: Toxicity, Addiction, Health Effects, Behavior, Communications, Marketing Influences, and Impact Analysis. R01 application deadline is **February 13, 2018**; followed by July 17, 2018, and February 13, 2019 by 5:00pm local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

**National Cancer Institute (NCI)/NIH/DHHS** **RFA-OD-17-014 Tobacco Regulatory Science (R21)** and companion funding opportunities **RFA-OD-17-013 (R01)** and **RFA-OD-17-012 (R03)** support biomedical and behavioral research that will provide scientific data to inform regulation of tobacco products to protect public health. Research Projects must address the research priorities related to the regulatory authority of the Food and Drug Administration (FDA) Center for Tobacco
Products (CTP). Science will inform the FDA in regulation of the manufacture, marketing, and distribution of tobacco products in order to reduce the public health toll from tobacco product use in the United States. Only applications proposing research relevant to one or more of the following areas will be considered: Toxicity, Addiction, Health Effects, Behavior, Communications, Marketing Influences, and Impact Analysis. **R03 application deadline is February 13, 2018; followed by July 17, 2018, and February 13, 2019 by 5:00pm local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.**

**National Cancer Institute (NCI)/NIH/DHHS Developing Interventions for Health-Enhancing Physical Activity PAR-18-307 (R21/R33 - Clinical Trial Optional) (Reissue of PAR-14-321) (see also companion Funding Opportunity PAR-18-324, R01)** encourages innovative research to improve our understanding of how to increase and maintain health-enhancing physical activity using multi-level interventions. Applicants should use the Socio-Ecological Model as a framework and should test multi-level interventions targeting at least two levels of the model. Interventions to be tested should seek to increase participants’ progression toward achieving the physical activity recommendation appropriate to the participants' health, abilities, and conditions. This FOA also seeks studies that address a wide range of population groups across the lifespan (e.g., racial and ethnic minorities, children, older adults, persons with medical conditions or addictive disorders, and persons with disabilities). Investigators are encouraged to build on prior research to refine evidence-based physical activity interventions and to make use of innovative partnerships within and across sectors as needed to study the implementation and outcomes of the proposed intervention. **Applications are due February 16, 2018; October 16, 2018; June 16, 2019; February 16, 2020; October 16, 2020, by 5:00 PM local time. Program expires January 8, 2021. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.**

**National Cancer Institute (NCI)/NIH/DHHS RFA-OD-17-013 Tobacco Regulatory Science (R01) and companion funding opportunities RFA-OD-17-012 (R03) and RFA-OD-17-014 (R21)** support biomedical and behavioral research that will provide scientific data to inform regulation of tobacco products to protect public health. Research Projects must address the research priorities related to the regulatory authority of the Food and Drug Administration (FDA) Center for Tobacco Products (CTP). Science will inform the FDA in regulation of the manufacture, marketing, and distribution of tobacco products in order to reduce the public health toll from tobacco product use in the United States. Only applications proposing research relevant to one or more of the following areas will be considered: Toxicity, Addiction, Health Effects, Behavior, Communications, Marketing Influences, and Impact Analysis. **R01 application deadline is February 16, 2018; followed by July 17, 2018, and February 13, 2019 by 5:00pm local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.**

**National Cancer Institute (NCI)/NIH/DHHS – PAR-15-297 Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research (U01)** seeks to advance research in cancer etiology and early detection biomarkers, utilizing the advantages of the unique biorepository resources of the NCI-sponsored Prostate, Lung, Colorectal, and Ovarian Cancer (PLCO) Screening Trial. This FOA supports a wide range of cancer research including, but not limited to, biochemical and genetic analyses of cancer risk, as well as discovery and validation of early detection biomarkers. The proposed research project must involve use of PLCO biospecimens; additionally, it should also take advantage of the unique characteristics of the PLCO biospecimens. **Application deadline is February 15, 2018; followed by August 15, 2018 by 5:00pm local time (non-standard dates).**

**National Cancer Institute (NCI)/NIH/DHHS Cancer-Related Behavioral Research Through Integrating Existing Data R21 PAR-16-255 (see also companion opportunity R01 PAR-16-256)** seek to integrate two or more independent data sets to answer novel cancer control and prevention questions. Research should apply Integrative Data Analysis (IDA) methods to existing data sources that study behavioral risk factors for cancer, including tobacco use, sedentary behavior, poor weight management, and lack of medical adherence to screening and vaccine uptake. **Application deadline is February 16, 2018; followed by June 15 2018; February 15, 2019; and June 14, 2019, by 5:00 PM local time (non-standard dates).**
Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process. Program Expires June 15, 2019.

**National Cancer Institute (NCI)/NIH/DHHS** Gene Fusions in Pediatric Sarcomas **PA-16-252 (R21)** (see also companion funding opportunity **PA-16-251 R01**) seeks research grant applications to investigate the molecular mechanisms by which oncogenic fusion genes and their gene products contribute to pediatric sarcoma initiation, progression, and metastasis. Better understanding of the molecular pathways activated by chromosomal translocations in pediatric sarcomas, and their relationship to oncogenesis and tumor progression, can elucidate mechanisms of cancer pathogenesis and potentially lead to novel therapeutics. **Application deadline is February 16, 2018**; followed by June 16, 2018; October 16, 2018; and February 16, 2019 by 5:00 PM local time (Standard dates). Program expires May 8, 2019.

**National Cancer Institute (NCI)/NIH/DHHS** – Integration of Individual Residential Histories into Cancer Research **PA-17-295 R21** (see also companion funding opportunity **PA-17-298 R01**) supports investigation of the role of individual residential histories in cancer etiology and outcomes, and to encourage the development of complex analytical strategies in support of substantive investigation. This FOA is suitable for projects where proof-of-principle of the proposed technology or methodology has already been established and supportive preliminary data are available. **Application deadline is February 16, 2018**; followed by June 16, 2018; October 16, 2018; February 16, 2019; June 16, 2019; October 16, 2019; February 16, 2020; and June 16, 2020 (Standard dates). Program expires September 8, 2020.

**National Cancer Institute/NIH/DHHS** **PA-17-109 R21 Reducing Overscreening for Breast, Cervical, and Colorectal Cancers among Older Adults** (see also companion funding opportunity **PA-17-110 R01**) supports research on interventions, based in healthcare settings, designed to reduce overscreening. **Application deadlines for R21 are February 16, 2018; June 16, 2018; October 16, 2018; February 16, 2019; June 16, 2019; and October 16, 2019 (Standard dates).** Program expires January 8, 2020.

**National Institute of Mental Health/NIH/DHHS - PAR-17-335 Discovery of Cell-based Chemical Probes for Novel Brain Targets (R21)** (see also companion funding opportunity **PAR-17-336 R01**) supports investigators who have interest and capability to join efforts for the discovery of in vivo chemical probes for novel brain targets. It is expected that applicants will have in hand the starting compounds (“validated hits”) for chemical optimization and bioassays for testing new analog compounds. **Application deadlines for R21 are February 16, 2018; February 16, 2018; June 16, 2018, October 16, 2018; February 16, 2019; June 16, 2019; October 16, 2019; February 16, 2020; and June 16, 2020 (Standard dates).** Program expires September 8, 2020.

**National Cancer Institute (NCI)/NIH/DHHS PAR-16-337 R03, and PAR-16-336 R21** - Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake (see also companion funding opportunity **PAR-16-338 R01**) support research on how the healthcare delivery system enhances or inhibits the effectiveness of a provider’s recommendation of the adolescent human papillomavirus (HPV) vaccine. Characteristics of the provider, parent/patient, and clinical setting, can all affect whether a provider makes a recommendation, and whether that recommendation results in uptake of the HPV vaccine. This research requires expertise in cancer prevention, adult and childhood behavior, immunization promotion, and healthcare delivery. **Application deadlines for R03 and R21 are February 16, 2018; June 16, 2018; October 16, 2018; February 16, 2019; and June 16, 2019 (Standard dates).** Program expires July 17, 2019.

**National Center for Advancing Translational Sciences (NCATS)/NIH/DHHS - PAR-17-465 Bench Testing Therapeutic/Indication Pairing Strategies** [UG3/UH3] invites applications for support of pre-clinical studies to repurpose existing experimental or FDA approved drugs or biologics (existing therapeutics) that have already begun or completed at least a Phase I trial. The hypothesis for proposed studies must be developed using innovative processes to identify the therapeutic/indication pair. **Applications are due February 28, 2018, June 26, 2018, October 30, 2018, February 27, 2019, June 26, 2019, October 30, 2019, February 27, 2020, June 26, 2020, by 5:00 PM local time. Program Expires September 8, 2020.**
National Cancer Institute (NCI)/NIH/DHHS - **PAR-16-416 NCI Small Grants Program for Cancer Research (NCI Omnibus R03)** supports small research projects on cancer that can be carried out in a short period of time with limited resources. The R03 grant mechanism supports different types of projects including pilot and feasibility studies; secondary analysis of existing data; small, self-contained research projects; development of research methodology; and development of new research technology. **Applications are due February 28, 2017; June 27, 2017; October 26, 2017; February 27, 2018; June 29, 2018; October 26, 2018; February 26, 2019; June 28, 2019; October 25, 2019.** Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. Program expires January 8, 2020.

**March 2018**

National Cancer Institute (NCI)/NIH/DHHS - Biology of Lung, and Head and Neck Preneoplasias: **PA-17-459 (R01 - Clinical Trial Not Allowed) & PA-17-460 (R21 - Clinical Trial Not Allowed)** seek applications investigating mechanistic and biological aspects of preneoplasia leading to lung, and head and neck (HN) cancers. Despite improved therapies and a deeper molecular understanding of lung and HN cancers, these tumors remain a major health problem in the United States and globally. While molecular markers of early injury to the aerodigestive epithelial field have been found, relatively little is known about the molecular mechanisms that initiate these preneoplasias and drive their progression to invasive cancer. A functional understanding of the key molecular changes involved in the formation and progression of lung and HN preneoplasias will enhance our knowledge of oncogenic progression and accelerate development of effective preventive and therapeutic strategies. **Next Applications are due March 5, 2018 for RO1 and March 16, 2018 for R21, by 5:00 PM local time after which standard NIH due dates apply until expiration on January 8, 2021.**

Damon Runyon Cancer Research Foundation **Fellowship Award** provides $231,000 over four years to support the training of the brightest postdoctoral scientists as they embark upon their research careers. This funding enables them to be mentored by established investigators in leading research laboratories across the country. **Customary deadlines are mid-March and mid-August 15.**

Damon Runyon Cancer Research Foundation - **Sohn Pediatric Cancer Fellowship Award** provides $231,000 over four years to support basic scientists and clinicians who conduct research with the potential to significantly impact the prevention, diagnosis or treatment of one or more pediatric cancers. Candidates must apply under the guidance of a scientific sponsor capable of providing mentorship who will foster the development of the Fellow’s overall knowledge, technical and analytical skills, and capacity for scientific inquiry. **Applications are due March 15, 2018.**

Union for International Cancer Control (UICC) **Yamagiwa-Yoshida Memorial International Study Grants (YY)** provide 14 to 16 annual awards averaging $10,000 for three-month periods to support researchers wishing to initiate, set up or pursue bilateral cancer research projects with collaborating investigators abroad; to exchange and exploit complementary skills and material; or to receive training in advanced experimental research methods and techniques. Applicants must possess PhD (or equivalent) at least 2 years prior to the application closing date; be actively engaged in cancer research; and have recent publications in the international peer-reviewed literature. Acceptable research plans include basic, translational or applied cancer research; prevention-oriented projects are especially encouraged. This is not a clinical training fellowship. **Applications are due twice per year on March 15 and October 15.**

Cholangiocarcinoma Foundation **Research Fellowship Program** provides one-year awards of $50,000 to support early career researchers studying cholangiocarcinoma. The goal is to raise awareness about cholangiocarcinoma and inspire innovative, quality research. **Applications are due March 16, 2018.**

**April 2018**

National Cancer Institute (NCI)/NIH/DHHS – **Innovative Molecular Analysis Technology Development for Cancer Research and Clinical Care (PAR-18-303 R43/R44 Clinical Trial Not Allowed)** encourages Small Business Innovation Research (SBIR) grant applications from small business concerns (SBCs) proposing research for commercial development...
of novel cancer-relevant technologies. The proposed research projects are expected to focus on the development of highly-innovative technologies that improve molecular and/or cellular analysis of cancer with a significant likelihood for either overcoming persistent challenges or obstacles or opening entirely new fields for cancer research or clinical care. Applications should specify milestones relevant to both the development and commercialization of these technologies. This FOA complements the goals of the NCI's Innovative Molecular Analysis Technologies (IMAT) program by facilitating the path towards technology commercialization. Prior participation in the IMAT Program is not required for eligibility for this FOA. Applications are expected to indicate the significant attributes and advantages of the proposed technology over currently available technologies and conventional approaches. Applications are due April 5, 2018; September 5, 2018; and January 5, 2019 by 5:00 PM local time (standard dates). Program expires January 8, 2021.

**National Cancer Institute (NCI)/NIH/DHHS - PAR-15-289 The Pancreatic Cancer Detection Consortium (U01)** invites applications from multi-disciplinary teams of researchers and clinicians to establish the Pancreatic Cancer Detection Consortium (PCDC) to conduct research to improve the detection of early stage pancreatic ductal adenocarcinoma (PDAC) and characterization of its precursor lesions. **Next deadline and final deadline is April 6, 2018.**

**National Cancer Institute (NCI)/NIH/DHHS – PAR-16-380 Fundamental Mechanisms of Affective and Decisional Processes in Cancer Control (R01)** seeks to encourage projects to generate fundamental knowledge of affective processes. Basic affective science projects should have key consequences for single (e.g., cancer screening) and multiple (e.g., adherence to oral chemotherapy regimen) event decisions and behaviors across the cancer prevention and control continuum. The FOA is expected to encourage collaboration among cancer control researchers and those from scientific disciplines not traditionally connected to cancer control applications (e.g., affective and cognitive neuroscience, decision science, consumer science) to elucidate perplexing and understudied problems in affective and decision sciences with downstream implications for cancer prevention and control. **Applications are due April 11, 2018, October 10, 2018, April 11, 2019, and October 10, 2019 (non-standard dates) by 5:00 PM local time.**

**National Cancer Institute (NCI)/NIH/DHHS – Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization - PAR-16-317 (R01) AND PAR-16-318 (R21)** support intervention research designed to support caregivers of adult cancer patients. Interventions supported by this FOA are intended to provide caregivers with care training, promote coping skills, and ultimately help them manage care. Outcomes of such interventions are expected to (1) optimize patient health care utilization, (2) improve caregiver well-being, and (3) improve patient physical health and psychosocial outcomes. **Applications for both R01 and R21 are due April 11, 2018, October 10, 2018, and April 11, 2019 (non-standard dates) by 5:00 PM local time.**

**JUNE 2018**

**National Cancer Institute (NCI)/NIH/DHHS Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions** R01 PAR-16-202 & R21 PAR-16-201 provide support for innovative and promising intervention research designed to improve smoking cessation outcomes among socioeconomically disadvantaged populations. **Applications for both R01 and R21 are due June 13, 2018, October 11, 2018, and June 13, 2019 by 5:00 PM local time (non-standard dates). Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process.**

**JULY 2018**

Damon Runyon Cancer Research Foundation – Rachleff Innovation Award provides $150,000 per year over two years (potentially renewable for an additional two years) to support the next generation of exceptionally creative thinkers with “high-risk/high-reward” ideas that have the potential to significantly impact our understanding of and/or approaches to the prevention, diagnosis or treatment of cancer. **Customary deadlines occur annually in mid-July.**

**SEPTEMBER 2018**
Conquer Cancer Foundation of ASCO offers a three-year, $200,000 Career Development Award (CDA) that provides funding to physician investigators who are in the first to third year of a full-time primary faculty appointment with a demonstrated ability to undertake independent investigator-initiated clinical research. The cancer research must have a patient-oriented focus, including a clinical research study and/or translational research involving human subjects. Proposals with a predominant focus on in vitro or animal studies (even if clinically relevant) are not allowed. Next application deadlines are anticipated to be in September 2018.

Conquer Cancer Foundation of ASCO offers the Young Investigator Award (YIA), which provides up to $50,000 for one-year to promising investigators to encourage and promote quality research in clinical oncology. The purpose of this grant is to fund physicians during the transition from a fellowship program to a faculty appointment. Next application deadlines are anticipated to be in September 2018.

Leukemia & Lymphoma Society - Specialized Center of Research Program offers up to $1,000,000 per year for up to five years to bring together established investigators from one or several institutions to develop a focused research program, foster new interactions and cooperation, and enhance interdisciplinary research among the participants. The overall goal of this mechanism is to enhance the development of innovative strategies for the treatment, diagnosis or prevention of hematological malignancies. Strategies that move discoveries from the bench to the clinic are of high importance as are integrated translational projects. Next application deadlines are anticipated to be in September 2018.

American Association for Cancer Research (AACR) - NextGen Grants for Transformative Cancer Research provide $450,000 over three years to support creative, paradigm-shifting cancer research that may not be funded through conventional channels. It is expected that these grants will catalyze significant scientific discoveries and help talented young investigators gain scientific independence. Next application deadlines are anticipated to be in September 2018.

Alex's Lemonade Stand Foundation for Childhood Cancer (ALSF) Nurse Researcher Fellowship provides up to $100,000 over two years to support early career nurse researchers who will be guided in their projects by a mentor and their institution. The fellowship’s goal is to train PhD and Master’s level nurse researchers to initiate and lead a multi-site research project. Next application deadlines are anticipated to be in September 2018.

American Association for Cancer Research (AACR) - Anna D. Barker Fellowship in Basic Cancer Research is open to postdoctoral and clinical research fellows working at an academic, medical, or research institution who have completed their most recent doctoral degree or medical residency within the past three years at the start of the grant term. The research proposed for funding may be in any area of basic cancer research. Next application deadlines are anticipated to be in September 2018.

American Association for Cancer Research (AACR) - Basic Cancer Research Fellowships are open to postdoctoral and clinical research fellows working at an academic, medical, or research institution who have completed their most recent doctoral degree or medical residency within the past three years at the start of the grant term. The research proposed for funding may be in any area of basic cancer research. The fellowships provide one-year grants of $50,000-$55,000 to support the salary and benefits of the fellow while working on a mentored basic cancer research project. A partial amount of funds may be designated for non-personnel expenses, such as research/laboratory supplies, equipment, publication charges for manuscripts that pertain directly to the funded project, and other research expenses. Next application deadlines are anticipated to be in September 2018.

The Burroughs Wellcome Fund (BWF) announces a $25,000,000 initiative to help institutions address the shortage of physician-scientists by creating programs to increase the number of M.D.’s entering research careers. Toward this end, BWF’s Physician-Scientist Institutional Program is offering $30,000 to support five-month planning grants to 20-25 institutions to develop full proposals for awards of $2.5M each ($500,000 per year over five years). Next application deadlines are anticipated to be in September 2018.

**OCTOBER 2018**
Rally Foundation - **Young Investigator, Independent Investigator & Consortium Grants in Pediatric Cancer** support research into under-studied cancer types, innovative approaches to childhood cancer research which could lead to advanced studies or clinical trials, studies that are likely to lead to a clinical trial, personalized, alternative, or integrated research proposals, and quality of life and survivorship research proposals at $50,000 to $100,000 per year over one or two years. **Mandatory Letters of Intent are traditionally due in early October**, with Full Applications (by invitation only) due the following January.

**Fanconi Anemia Research Fund Research Grants** provide $150,000 to $175,000 over two years to support research that focuses on the rapid discovery and development of therapies or strategies that treat, control, or cure Fanconi anemia, with a particular interest in interdisciplinary and translational research efforts that effectively address one or more of the following priorities: how alteration of the Fanconi anemia genes and their products lead to the clinical manifestations of Fanconi anemia; causes of bone marrow failure, myelodysplasia and leukemia in individuals with Fanconi anemia, and strategies to prevent, treat, and cure these disorders; pathogenesis of Fanconi anemia-associated cancers, strategies for prevention, early detection, treatment and cure; practical and proactive management strategies that families and persons with Fanconi anemia can use to maintain a high quality of life; creation of shared resources, databases, and technologies for the international Fanconi anemia research community. **Mandatory Letters of Intent are traditionally due in early October**.

**American Cancer Society, Inc. (ACS)** offers numerous research funding opportunities, **application deadlines for which are traditionally in mid-October.**

**Research Scholar Grants** to support investigator-initiated projects across the cancer research continuum. Awards are for up to four years and for up to $165,000 per year (direct costs), plus 20% allowable indirect costs. Independent investigators in the first six years of an independent research career or faculty appointment are eligible to apply.

**Mentored Research Scholar Grants** of up to $135,000 per year over up to five-years for for mentored research and training to full-time junior faculty, typically within the initial four years of their first independent appointment. The goal is for these beginning investigators to become independent researchers as either clinician scientists or cancer control and prevention researchers. A maximum of $10,000 per year for the mentor(s) (regardless of the number of mentors) is included in the $135,000.

**Postdoctoral Fellowships** totaling $113,500 over three-years that are designed to support a program of research training and study to enable a new investigator to qualify for an independent career in cancer research. The Peer Review Committee reviewing the application will consider whether the fellowship broadens the applicant’s research training and experience.

**Cancer Control Career Development Awards for Primary Care Physicians** of $100,000 per year over three-years to support Primary Care Physicians in supervised programs to develop clinical and teaching expertise and the capacity to perform independent research or educational innovation in cancer control.

**Research Scholar Grant in the Role of Healthcare and Insurance in Improving Outcomes in Cancer Prevention, Early Detection and Treatment** for research that evaluates the impact of the many changes now occurring in the health care system with a particular focus on cancer prevention, control, and treatment. Efforts focusing on improving access to care may also impact inequities that contribute to health disparities. New health public policy initiatives, for example the new federal and state marketplaces that have expanded insurance coverage, as well as Medicaid expansion in some states, create natural experiments ripe for evaluation. Research to be funded by this RFA should focus on the changes in national, state, and/or local policy and the response to these changes by health care systems, insurers, payers, communities, practices, and patients. The awards are for up to four years and for up to $165,000 per year (direct costs), plus 20% allowable indirect costs. Independent investigators in the first six years of an independent research career or faculty appointment are eligible to apply.
Pilot and Exploratory Projects in Palliative Care of Cancer Patients and Their Families supports two-year research projects at up to $60,000 per year for clinician investigators conducting patient-oriented research in palliative care of cancer patients and their families. These grants will generate the pilot data necessary to maximize an investigator’s chances of competing successfully for larger grants.

American Cancer Society, Inc. (ACS) – Melanoma Research Alliance call for Pilot Award RFA: Understanding, Preventing, and Managing Immunotherapy-related Adverse Events (irAEs) Associated with Checkpoint Inhibition for Melanoma and Other Cancers to support up to five two-year $200,000 awards for potentially transformative early studies that will form the basis of future research. Fellows, others in training or those in research support positions are not eligible to apply. Pilot Award proposals are not required to contain extensive preliminary data, but must articulate a strong hypothesis and translational goals. Proposals should include some aspect of melanoma research but need not be limited to this disease area.

American Association for Cancer Research (AACR) -Aflac Inc. Career Development Award for Pediatric Cancer Research provides up to $100,000 over a two-year period to support junior faculty to conduct pediatric cancer research and establish a successful career path in this field. The research proposed for funding may be basic, translational, clinical, or epidemiological in nature and must have direct applicability and relevance to pediatric cancer. Applications are traditionally due in mid-October.

Pablove Foundation Childhood Cancer Research Seed Grants provide $50,000 to conduct innovative, cutting edge investigations, with preferences going toward less common childhood cancers. In addition, projects that focus on Opsoclonus-Myoclonus Syndrome (OMS) will be considered. The Pablove Foundation is interested in principal investigators who will join us in taking risks, pushing for new solutions, and harnessing the transformative power of science in their research in the following broad areas: Mechanisms of Disease. Genetics, Preclinical Models, Biomarkers and Surrogate Markers, Prognostic Factors, Diagnosis, Innovative Clinical Therapeutic Trials, Minimal Residual Disease Detection, Treatment, Supportive Care and Prevention, Amelioration of Long-Term Effects of Therapy. Senior postdoctoral fellows and junior faculty who hold MDs or PhDs are eligible for this career development award. In addition, established scientists who are re-directing their research are also eligible to apply for seed funding. Mandatory Letters of Intent are traditionally due in mid-October.

Damon Runyon Cancer Research Foundation Fellowship Award provides $231,000 over four years to support the training of the brightest postdoctoral scientists as they embark upon their research careers. This funding enables them to be mentored by established investigators in leading research laboratories across the country. Customary deadlines are mid-March and mid-August.

Sarcoma Alliance for Research Through Collaboration (SARC) Developmental Research Program, was initiated to support the ideas and work of investigators that complement the depth of sarcoma translational research and help to ensure the continual renewal of high-quality scientific endeavors in the SARC Sarcoma SPORE. Developmental Research Grants are awarded in the amount of $50,000/year, with the option to expand. View past recipients. Customary deadline is mid-September.

Cancer Research Institute Clinic and Laboratory Integration Program (CLIP) Grants provide up to $200,000 over a two-year period to support qualified scientists who are working to explore clinically relevant questions aimed at improving the effectiveness of cancer immunotherapies. The program supports basic, pre-clinical, and translational research that can be directly applied to optimizing cancer immunotherapy in the clinic. Mandatory Letters of Intent are normally due in early September and Applications in early February.

November 2018
AACR-Janssen Fellowship in Cancer Interception Research provides $110,000 over two years to encourage and support a postdoctoral or clinical research fellow to conduct basic, translational, clinical, or epidemiological research in the field of cancer interception, which encompasses the areas of prevention, early detection, and early intervention, and to establish a successful career path in this field. Applications are normally due in early November.

National Marrow Donor Program - Amy Strelzer Manasevit Research Program for the Study of Post-Transplant Complications provides up to $240,000 over three years in support of the research endeavors of scientists and clinicians early in their careers. Its goal is to launch these young investigators on a life-long journey to discover solutions to potentially life-threatening post-transplant complications such as infection or graft-versus-host disease. The research proposal must address complications arising after allogeneic hematopoietic cell transplantation. Applications are normally due in early November.

CONTINUOUS SUBMISSION

Adenoid Cystic Carcinoma Research Foundation supports directed research efforts to find a cure for adenoid cystic carcinoma (ACC) following its Research Agenda. Researchers who wish to submit a proposal should email a one paragraph description of the research project. If the concept is determined to be in line with the priorities of the Scientific Advisory Board, then a full proposal may be submitted. There is no set timetable for submissions. Typically, responses are provided to applicants within several weeks.

A Kids’ Brain Tumor Cure/Pediatric Low Grade Astrocytoma Foundation supports Brain Tumor Research Grants for pediatric low grade glioma research for up to three-year periods, with funding levels based on size, impact and complexity. Proposals related to basic and translational projects that can advance understanding of the underlying biology of the development and treatment of PLGA tumors will be considered. Investigators in the early years of their careers are encouraged to apply. Applications are accepted in an on-going review process throughout the year.

American Association for Cancer Research (AACR) offers Scholar-in-Training Awards providing financial support for early career scientists to travel to attend AACR conferences and meetings. Deadlines vary by individual conferences.

McDonnell (James S.) Foundation offers Collaborative Activity Awards to initiate interdisciplinary discussions on problems or issues, to help launch interdisciplinary research networks, or to fund communities of researchers/practitioners dedicated to developing new methods, tools, and applications of basic research to applied problems for program areas including Mathematical & Complex Systems Approaches for Brain Cancer. There are no deadlines for this grant type and award budgets for collaborative activities will vary greatly depending on the scope of the proposed problem or project.