# **Pilot Award Program - Full Application Submission**

PRINCIPAL INVESTIGATOR INFORMATION
(Refer to the "Applicant Eligibility" section of the RFA before completing and submitting an application.)
Last Name
First Name
Middle Name or Initial
Primary Department
Division (if applicable)
Degree(s)
Check all that apply
☐ MD ☐ PhD ☐ Other
If you hold another degree, please specify
NIH eRA Username
Email Address
Phone number(s) where you can easily be reached for clarifications



# **PROJECT INFORMATION**

This proposal is:
<ul> <li>New application (was never submitted to any UM internal grant mechanism (e.g., CHARM, CTSI, CFAR, Cancer Center, etc.)</li> <li>FIRST re-submission from a UM internal grant mechanism (e.g., CHARM, CTSI, CFAR, Cancer Center, etc.)</li> </ul>
Project Title
<del></del>

# CO-INVESTIGATORS, OTHER SIGNIFICANT CONTRIBUTORS AND MENTORS

Complete the "Collaborators table" document available on the CHARM website under "Forms and Instructions" with information on the Co-Investigators, Other Significant Contributors, and Mentors. Do not list research staff (coordinators, research assistants, etc.).

A Co-Investigator is someone with a key role in the project.

Other Significant Contributors are typically investigators contributing a key element/expertise to the project but not necessarily a mentor.

Mentors are typically senior investigators responsible for advising the PI during the project. Applications submitted by junior investigators at assistant professor level, researchers new to HIV/AIDS and mental health research and post-doctoral fellows require a mentor to be listed on their project.

File Name: Last name\_collaborators

#### PUBLIC HEALTH RELEVANCE

Using no more than two or three sentences, describe the relevance of this research to public health. In this section, be succinct and use plain language that can be understood by a general, lay audience.

#### PROJECT SUMMARY/ABSTRACT

This section is meant to serve as a succinct and accurate description of the proposed work when separated from the application. State the application's broad, long-term objectives and specific aims, making reference to the health relatedness of the project. Describe concisely the research design and methods for achieving the stated goals. This section should be informative to other persons working in the same or related fields and insofar as possible understandable to a scientifically or technically literate reader.

Format: LIMIT 30 lines of text, Arial 11 point font, single-spacing, 0.5" margins

File Name: Last Name\_abstract

**REDCap**°

06/22/2020 5:05pm projectredcap.org

## **RESEARCH PLAN**

To complete this section, follow the application instructions available below and in the RFA.

Proposals that are incomplete or otherwise do not follow instructions will not be considered for review.

# SPECIFIC AIMS

- State concisely the goals of the proposed research and summarize the expected outcome(s), including the impact that the results of the proposed research will exert on the field(s) involved.
- List succinctly the specific objectives of the research proposed (e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, or develop new technology).

Format: LIMIT 1 PAGE, Arial 11 point font, single-spacing, 0.5" all margins

File Name: Last Name aims

## **RESEARCH STRATEGY**

Address Significance, Innovation and Approach. Include a timeline for the project.

## Significance:

- Explain the importance of the problem or critical barrier to progress that the proposed project addresses.
- Describe the scientific premise for the proposed project, including consideration of the strengths and weaknesses of published research or preliminary data crucial to the support of your application.
- Explain how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
- Include information on preliminary studies. Discuss the PI's preliminary studies, data, and or experience pertinent to this application.

# Innovation:

- Explain how the application challenges and seeks to shift current research or clinical practice paradigms.
- Describe any novel theoretical concepts, approaches or methodologies, instrumentation or intervention(s) to be developed or used, and any advantage over existing methodologies, instrumentation, or intervention(s).
- Explain any refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions.

#### Approach:

- Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Describe the experimental design and methods proposed and how they will achieve robust and unbiased results. Include how the data will be collected, analyzed, and interpreted as well as any resource sharing plans as appropriate.
- Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the aims.
- Describe any strategy to establish feasibility, and address the management of any high risk aspects of the proposed work.
- Explain how relevant biological variables, such as sex, are factored into research designs and analyses.

Format: LIMIT to 5 pages (including timeline), Arial 11 point font, single-spacing, 0.5" margins

File Name: Last Name\_Strategy



#### COMMUNITY ENGAGEMENT

Provide a: 1) list of proposed community partner(s) or agency(ies) AND 2) paragraph (400 word limit) explaining a) how the project will engage the community, b) the role of the proposed community partner(s) or agency(ies), AND c) how the findings may impact the community.

The chosen community partner/agency should be engaged in the design and execution of the project as well as in the interpretation and publication of findings. Community partners can be engaged at varying levels from a consultative role to community-based participatory research.

Format: Include list (no word limit) and paragraph (400 word limit), Arial 11 point font, single-spacing, 0.5" margins

File name: Last name\_Community

### CAREER GOALS and FUTURE FUNDING

- Describe how this project is important to your career goals. Explain the direction of your research and your long-term goals,
- Explain how the results from this project will lay the foundation for extramural funding. Indicate a project timeline for submitting extramural grant application(s). Specify which type of grant you expect to submit.

Format: LIMIT 400 words, Arial 11 point font, single-spacing, 0.5" all margins.

File Name: Last Name Goals Funding

#### **BIBLIOGRAPHY & REFERENCES CITED**

Do not include any visuals or any information that is not a cited reference.

Format: No page limit; Arial 11 point font, single-spacing, 0.5" all margins.

File Name Format: Last Name References

# **SUPPORTING DOCUMENTATION**

# **CENTER USAGE**

All applicants are required to use the CHARM resources pre-submission and post-award. To this end, a) list and describe which Core(s) were consulted or resource(s) used in preparing this application AND b) list and describe which Core(s) may be consulted or resource(s) used post-award. Refer to the "About the Center" and "Research Support" sections on the CHARM website for information on CHARM Cores and resources.

Format: No word/page limit; Arial 11 point font, single-spacing, 0.5" all margins.

File Name: Last Name Center usage



## **BUDGET & BUDGET JUSTIFICATION**

Awards will be of up to \$40,000 (direct costs only) for a one-year period (04/01/2021 - 03/31/2022; the period may start before or after 04/2021).

Expenses should be restricted to personnel, research supplies, cost for subject participation, test supplies and technical support. Applicants must provide a budget justification for each person, including a detailed description of the role for each investigator considering the proposed effort, and item listed in the budget. Fringe rates prescribed by the University of Miami should be used. Names and positions of all personnel must be individually listed and the percentage of time to be devoted to the project by each person should be noted. If an individual is being listed with effort but no salary support, they typically should be listed as mentor or other significant contributor. If an individual has not yet been hired, please list as "TBD."

Applicants may be asked to revise the proposed budget and corresponding justification before funding consideration.

Use the "Budget template" available on the CHARM website under "Forms and Instructions". BOTH the budget AND budget justification should be uploaded.

File Name: Last name\_Budget

## **BIOSKETCHES**

Biosketches are required for the PI, Co-Investigators, Other Significant Contributors and Mentors. Use the "Biosketch template" available on the CHARM website under "Forms and Instructions" and upload as ONE PDF. Instructions on completing NIH biosketches are available here.

File Name: Last Name Bioskectches

## LETTERS OF SUPPORT AND COMMITMENT

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- Community Partner/Agency: A letter of support from your community partner or agency is REQUIRED and should clearly spell out their roles in the project. The award application should contain a signed and dated letter from each community partner or agency that lists the contributions and expresses their commitment to the project.
- Consultants: Letters should include rate/charge for consulting services. If community partners or agencies will serve as consultants and be compensated, their letter of support should also include their rate/charge for consulting services.
- Mentor: Junior faculty, post-doctoral fellows and any investigator new to HIV research is REQUIRED to name a mentor and include a letter of support. The letter should reflect support from the mentor and detail exactly how the mentor intends to support the pilot applicant.
- Department Chair: For post-doctoral fellows, a letter from the Department Chair is required. The letter should indicate support for the application and a potential research/faculty appointment at the completion of the post-doctoral fellowship.

Upload all the letters in ONE PDF

File Name: Last Name\_LOS



# **REVIEWERS**

Consider that all UM faculty are potential reviewers.

You may name any potential reviewers who you believe could not provide an impartial review and request they not review your application. The Review Committee will consider this request but is not required to accommodate it. You may include a justification for your selection (optional).

Please provide any recommendations for reviewers. They should not be current collaborators or mentors. If they are external to UM, please provide the institutional affiliation and email address.



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