CHARM Developmental Awards Program - Speed Review Submission

Which CHARM Developmental Award do you intend to apply for?

- [ ] Pilot Award
- [ ] Scholar Award

SECTION 1
PRINCIPAL INVESTIGATOR (PI) INFORMATION

Last Name

__________________________________

First Name

__________________________________

Middle Name or Initial

__________________________________

Institution

__________________________________

C Number if your institution is University of Miami

__________________________________

Phone Number where we can easily reach you for clarifications
(You may enter more than one)

__________________________________

Email Address

__________________________________

Primary Department

__________________________________

Division (If not applicable, enter N/A)

__________________________________
Degree(s)- Check all that apply

☐ MD  ☐ PHD  ☐ Other

If other, please specify

__________________________________

SECTION 2
COLLABORATORS, OTHER SIGNIFICANT CONTRIBUTORS, and MENTORS

Co-Investigator 1: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

(Note: A Co-Investigator is someone with a key role in the project.)

__________________________________

Co-Investigator 2: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

__________________________________

Co-Investigator 3: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

__________________________________

Significant Contributor 1: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

(Note: Other significant contributors are typically investigators contributing a key element/expertise to the project but not necessarily a mentor.)

__________________________________

Significant Contributor 2: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

__________________________________

Significant Contributor 3: (1) Name, (2) Department & (3) Role in this project (Max. 20 words)

__________________________________

Do you have a mentor?

(Note: 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.)

☐ Yes  ☐ No  ☐ Not applicable

Name and Department / Division of Mentor(s)
If you do not have a mentor, would you like assistance with identifying a mentor?

☐ Yes  ☐ No

SECTION 3
PROJECT INFORMATION

Proposal Title

__________________________________

RESEARCH ABSTRACT (MAX. 300 words)

Briefly describe the proposed objective, study design and target population. Explain the rationale for the proposed work.

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 have on the research 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: 1 page, Arial 11 point font, single-spacing, 0.5" margins.
File name:  Last name__Specific Aims_awardtype_year

COMMUNITY ENGAGEMENT

Upload a document with a:

1) list of proposed community partner(s) or agency(ies) AND

2) paragraph 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.

Format:  Arial 11 point font, single-spacing, 0.5" margins, 500 word limit
File name:  Last name__community

(Note: 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. The full application must include a letter of support from the community partner or agency.)
Reviewers: Consider that all University of Miami faculty as well as Faculty from Florida International University, Florida State University, and Nova Southeastern University 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). In addition, if possible, please provide any recommendations for reviewers. They should not be current collaborators or mentors.