**APPLICATION FOR A PILOT PROJECT GRANT FROM AMERICAN CANCER SOCIETY**

**INSTITUTIONAL RESEARCH GRANT #IRG –22-144-60**

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| BIOGRAPHICAL INFORMATION | | | | | | | | | | | | | | | | | | |
| First Name, Last name, Degree(s) | | | | | | | |  | | | | | | | | | |  |
|  |  | | | | | | | | | | |  | | | | | |  |
|  | Academic Title | | | | | | | | | | | Department | | | | | |  |
|  |  | | | | | | | | | | |  | | | | | |  |
|  | School | | | | | | | | | | |  | | | | | |  |
| Citizenship Status | | | | | | | | | | | | | | | | | | |
|  |  |  | U.S. citizen | | | | | | | |  | | Non-U.S. citizen (temporary resident) \*\*\* | | | | | |
|  |  |  | Non-U.S. citizen (permanent resident) | | | | | | | |  | | Non-U.S. citizen \*\*\* | | | | | |
| Year last degree conferred: | | | | | |  | | | Date of first independent position (MM/DD/YYY): | | | | | | | |  |  |
| **Verification of Applicant Eligibility by Department Chair** *(Applicants must be within six years of their first independent research or faculty appointment, must be salaried faculty with appropriate committed research facilities, and may not have competitive national funding active at the start date of the proposed IRG allocation.)* | | | | | | | | | | | | | | | | | | |
| Name of Department Chair | | | | | | |  | | | | | | | | | | |  |
| Signature | | | |  | | | | | | | | | | Date: | | |  |  |
|  | | | | |  | | | | | | | | | |  | | | |
|  | | | | | **Education** | | | | | | | | | |  | | | |
| Degree/year conferred | | | | | Institution/Location | | | | | | | | | | Field of study | | | |
|  | | | | |  | | | | | | | | | |  | | | |
|  | | | | | **Training** | | | | | | | | | |  | | | |
| Title | | | | | Mentor | | | | | Institution/Location | | | | | | Dates | | |
|  | | | | |  | | | | |  | | | | | |  | | |
| *\*\*\* Any applicant for IRG pilot project funding who is not a U.S. citizen must hold a visa that will allow him or her to remain in the U.S. long enough to complete the IRG pilot project. It is the responsibility of the institution to determine and document the visa status of any noncitizen recipient of IRG funds.*  Continued on next page | | | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- |
| First Name, Last name, Degree(s) | | |  | |  |
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|  | **Appointments** | | |  | |
| Title | | Institution/Location | | Dates | |
|  | |  | |  | |
| **Other Research Support:** | | | | | |
|  | | | | | |
| **Publications** (use continuation page if necessary) | | | | | |
|  | | | | | |
| Continued on next page | | | | | |

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| First Name, Last name, Degree(s) |  |  |

**PROJECT TITLE:**

**ABSTRACT:** Provide a brief (300-500 words) summary of the research, including Background, Objective/Hypothesis, Specific Aim(s), Study Design, and Cancer Relevance. *The final sentence of the abstract should summarize the focus and cancer relevance of the project in non-scientific terms.*

|  |  |
| --- | --- |
| First Name, Last name, Degree(s) |  |

**PROJECT TITLE:**

**DESCRIPTION OF RESEARCH PROPOSED** (use up to four continuation pages as necessary)**:**

|  |  |  |
| --- | --- | --- |
| First Name, Last name, Degree(s) |  |  |

**TOTAL AMOUNT REQUESTED:**  **TERM:** from to

**BUDGET JUSTIFICATION PROPOSED:**

**A. Personnel**

**B. Permanent Equipment**

**C. Supplies**

**D. Miscellaneous**

|  |  |  |
| --- | --- | --- |
| DETAILED BUDGET FOR INITIAL BUDGET PERIODDIRECT COSTS ONLY | FROM | THROUGH |
|  |  |

List PERSONNEL *(Applicant organization only)* Use Cal, Acad, or Summer to Enter Months Devoted to Project

Enter Dollar Amounts Requested *(omit cents)* for Salary Requested and Fringe Benefits

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME | ROLE ON PROJECT | Cal.  Mnths | Acad.  Mnths | Summer  Mnths | INST.BASE SALARY | SALARY REQUESTED | FRINGE BENEFITS | | TOTAL |
|  | PD/PI |  |  |  |  |  |  | |  |
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| SUBTOTALS | | | | | |  |  | |  |
| EQUIPMENT COSTING LESS THAN $2,000 *(Special justification is necessary for items exceeding this amount)* | | | | | | | | |  |
| SUPPLIES *(Itemize by category)* | | | | | | | | |  |
| DOMESTIC TRAVEL *(When necessary to carry out the proposed research program)* | | | | | | | | |  |
| OTHER EXPENSES *(Itemize by category)* | | | | | | | | |  |
| TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD | | | | | | | | $ |  |

**Additional Information**

1. **Underrepresented Minority (URM)**

|  |  |
| --- | --- |
| Race/Ethnicity: |  |
| Black or African American | Hispanic or Latino |
| American Indian or Alaska Native | Native Hawaiian |
| Other Pacific Islander (Samoan, Guamanian or Chamorro, Fijian, Tongan, or Marshallese peoples) | Other, please specify:  Not Applicable |

1. **Mentor(s)**

Identify your mentor(s) and include a statement as to how your research or study is independent from your mentor(s) at USC and/or CHLA.

1. **Narrative (Lay Person Summary)**

Provide a summary, approximately five (5) to seven (7) sentences, describing your proposed research project. Use lay person terms understandable by a general audience.