



## NATIONAL SCLERODERMA FOUNDATION GRANT APPLICATION

DESCRIPTION: State the application's broad, long-term objectives and specific aims, making reference to the scleroderma relatedness of the project. Describe concisely the research design and methods for achieving these goals. Avoid summaries of past accomplishments and the use of the first person. This abstract is meant to serve as a succinct and accurate description of the proposed work when separated from the application. If the application is funded, this description, as is, will become public information. Therefore, do not include proprietary/confidential information. **DO NOT EXCEED THE SPACE PROVIDED.**

PERFORMANCE SITE(S) (*organization, city, state*)

KEY PERSONNEL. See instructions. *Use continuation pages as needed* to provide the required information in the format shown below. Start with Principal Investigator. List all other key personnel in alphabetical order, last name first.

Name	Organization	Role on Project
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# NATIONAL SCLERODERMA FOUNDATION GRANT APPLICATION

The name of the principal investigator must be provided at the top of each printed page and each continuation page.

## RESEARCH GRANT TABLE OF CONTENTS

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<b>Detailed Budget for Initial Budget Period</b> .....	_____
<b>Budget for Entire Proposed Period of Support</b> .....	_____
<b>Budget Justification</b> .....	_____
<b>Resources</b> .....	_____
<b>Biographical Sketch</b> —Principal Investigator ( <i>Not to exceed five pages</i> )	_____
<b>Other Biographical Sketches</b> ( <i>Not to exceed five pages for each</i> ).....	_____
<b>Other Support</b> .....	_____
<b>Introduction</b> (for revised/resubmitted application only) .....	_____
 <b>Research Plan</b>	
Introduction to Revised Application ( <i>Not to exceed 2 pages</i> ) .....	_____
Introduction to Supplemental Application ( <i>Not to exceed one page</i> ) .....	_____
A. Specific Aims .....	} ( <i>Items A-D: not to exceed 10 pages*</i> )
B. Background and Significance .....	
C. Preliminary Studies .....	
D. Research Design and Methods .....	
E. Relevance to Scleroderma.....	_____
F. Human Subjects .....	_____
G. Vertebrate Animals .....	_____
H. Literature Cited .....	_____
I. Consortium/Contractual Arrangements .....	_____
J. Consultants .....	_____
K. Letters of agreement.....	_____

**Appendix** (*No page numbering necessary for Appendix.*)  Check if Appendix is Included

Number of publications and manuscripts accepted for publication (*not to exceed 3*) \_\_\_\_\_  
Other items (list): \_\_\_\_\_

Principal Investigator (Last, first, middle): \_\_\_\_\_

□

Principal Investigator (Last, first, middle): \_\_\_\_\_

## **Lay Person Summary**

□

Principal Investigator (Last, first, middle): \_\_\_\_\_

<b>DETAILED BUDGET FOR INITIAL BUDGET PERIOD DIRECT COSTS ONLY</b>	FROM	THROUGH
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PERSONNEL <i>(Applicant organization only)</i>		TYPE APPT. <i>(months)</i>	% EFFORT ON PROJ.	INST. BASE SALARY	DOLLAR AMOUNT REQUESTED <i>(omit cents)</i>		
NAME	ROLE ON PROJECT				SALARY REQUESTED	FRINGE BENEFITS	TOTAL
	Principal Investigator						

**SUBTOTALS** →

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CONSULTANT COSTS

EQUIPMENT *(Itemize) Do not exceed \$5,000*

SUPPLIES *(Itemize by category)*

TRAVEL *Do not exceed \$2,000*

PATIENT CARE COSTS	INPATIENT
	OUTPATIENT

OTHER EXPENSES *(Itemize by category)*

**SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD**

\$	
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INDIRECT COSTS (FACILITIES AND ADMINISTRATION)\*  
\*INDIRECT COSTS ARE INCLUDED IN TOTAL AWARD AND MAY BE UP TO 8%

**TOTAL COSTS FOR INITIAL BUDGET PERIOD** *(Item 7b, Face Page)* →

\$	
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**BUDGET FOR ENTIRE PROPOSED PROJECT PERIOD  
DIRECT COSTS ONLY**

BUDGET CATEGORY TOTALS		INITIAL BUDGET PERIOD <i>(from previous page)</i>		
			2nd	3 <sup>rd</sup> *
PERSONNEL: <i>Salary and fringe benefits. Applicant organization only.</i>				
CONSULTANT COSTS				
EQUIPMENT				
SUPPLIES				
TRAVEL				
PATIENT CARE COSTS	INPATIENT			
	OUTPATIENT			
OTHER EXPENSES				
SUBTOTAL DIRECT COSTS				
INDIRECT COSTS (FACILITIES AND ADMINISTRATION)*				
<b>TOTAL COSTS</b>				
<b>TOTAL COSTS FOR ENTIRE PROPOSED PROJECT PERIOD (DIRECT and INDIRECT) (Item 8A, Face Page)</b>				

\*3<sup>rd</sup> year for New Investigators Grant Only

Principal Investigator (Last, first middle: \_\_\_\_\_)  
**BUDGET JUSTIFICATION PAGE**

Principal Investigator (Last, first middle: \_\_\_\_\_)

### **RESOURCES**

**FACILITIES:** Specify the facilities to be used for the conduct of the proposed research. Indicate the performance sites and describe capacities, pertinent capabilities, relative proximity, and extent of availability to the project. Under "Other," identify support services such as machine shop, electronics shop, and specify the extent to which they will be available to the project. Use continuation pages if necessary.

Laboratory:

Clinical:

Animal:

Computer:

Office:

Other:

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**MAJOR EQUIPMENT:** List the most important equipment items already available for this project, noting the location and pertinent capabilities of each.

Principal Investigator (Last, first middle: \_\_\_\_\_)

**BIOGRAPHICAL SKETCH**

**USE THE CURRENT NIH** format and guidelines. Provide the following information for the key personnel in the order listed on Page 2. Follow the format for each person. **DO NOT EXCEED FIVE PAGES FOR EACH.**

NAME	POSITION TITLE
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EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY

Principal Investigator (Last, first middle: \_\_\_\_\_)

**OTHER SUPPORT**

Principal Investigator (Last, first middle: \_\_\_\_\_)

**RESEARCH PLAN**