<u><u> </u></u>	SPIRE APPLICATION CHECK LIST		
Signed Face Page			
☐ Investigator and Site f	orms		
Cost Share Agreement			
Table of Contents			
Abstract Page			
SPiRe Need for funding	g statement		
Budget, including budget	get justification		
Biosketch(es) of PI an	Biosketch(es) of PI and all Co-Investigators		
Research Proposal			
 Introduction Specific Aims Research Strategy 	(2-page limit) (1-page limit) (6-page limit)		
Human SubjectsVertebrate Animals	(2-page limit) (2-page limit)		
Bibliography	(3 page limit)		
☐ Letters of Support or 0	Collaboration		
Appendix			

Application Form for Research Grant Support Face Page (Page 1)

FORM MUST BE TYPEWRITTEN

Principal Investigator:		(Last Name, First Name, Degree(s))	Rank (check only one)	☐ Research Assistant Professor	Assistant Pro	ofessor		
Years of Budget Requested	1 Yr.	2 Yrs. □	Total Cost for Project All Categories)	☐ Research Associate Professor <u>Year 1</u>	Associate Pr <u>Year 2</u>			
Primary Dept. and Div	ision:		Have you previously appl If "Yes," when?	Ũ	SPiRe? 🗌 Ye	s 🗌 No		
Telephone:		Fax:	Is this a revised SPIRE a	pplication?	☐ Ye	s 🗌 No		
			Research Compliance Does this research use:					
			Recombinant DNA? If "Yes," IBC approval before an award can b		☐ Yes	🗌 No		
Title of Investigation:			Human Subjects? - If "Yes," IRB approval v before an award can b		☐ Yes	□ No		
			Vertebrate Animals? If yes, IACUC approva before an award can b		☐ Yes	□ No		
Location/Facility for Completion of Project:		CITI Training? If yes, expiration date//		☐ Yes	🗌 No			
			COI Completion If yes, expiration date	<u>//</u> .	🗌 Yes	No 🗌 No		

If an award is made, the recipient will abide by all guidelines established by the Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), and/or the Institutional Biosafety Committee (IBC) and any other relevant University Compliance committee reviews or institutional requirements, in addition to any cooperative agreements between the University and other institutions.

Signature of Principal Investigator	Date
Signature of Principal Investigator's Supervisor	Date
Print or type name of Principal Investigator's Supervisor	Date
Signature of Department Chair	Date

SENIOR/KEY PERSONNEL. See instructions. Use continuation pages as needed to provide the required information in the format shown below. Start with Program Director(s)/Principal Investigator(s). List all other senior/key personnel in alphabetical order, last name first.

Name

eRA Commons User Name

Organization

Role on Project

OTHER SIGNIFICANT CONTRIBUTORS Name

Organization

Role on Project

PROJECT/PERFORMANCE SITE(S) (if additional space is needed, use Project/Performance Site Format Page)

Project/Performance Site Primary Location				
Location:				
Street:		Street 2:		
City:	County:		State:	
Project/Performance Site:				
Additional Project/Performance Site Location				
Name:				
Street:		Street 2:		
City:	County:		State:	

SPIRE Need for Funding

Principal Investigator:

Title of Proposal: _____

Form must be typewritten. If more space is needed, please use one additional page for each section.

1. Summarize your need for funding from the SPIRE for the proposed project. Specify how funding will enable the submission of a highly competitive grant proposal.

2. If the SPIRE application represents a request for funds to extend an ongoing project into a new direction, it is essential to specify clearly how the proposed project differs from the ongoing research. The source of funding for the ongoing research should be identified, and the reason(s) why that source is not available for the SPIRE-proposed project should be given.

Budget Justification:

Personnel: While salary support is not awarded, the PI must clearly state the role and percent effort of each individual named.

Materials:

Animals:

Human Studies:

Equipment:

Travel for training etc.:

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITL	POSITION TITLE		
eRA COMMONS USER NAME (credential, e.g., agency login)	_			
EDUCATION/TRAINING (Begin with baccalaureate or other initial proferesidency training if applicable.)	essional education, su	uch as nursing, inclu	de postdoctoral training and	
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY	

- A. Personal Statement
- B. Positions and Honors
- C. Selected Peer-Reviewed Publications (limit 15)
- D. Research Support (ongoing and completed projects for the past three years)

		OTTER SOFF OF
	Format	
NAME OF INDIVIDUAL ACTIVE/PENDING		
Project Number (Principal Investigator) Source Title of Project <i>(or Subproject)</i>	Dates of Approved/Proposed Project Annual Direct Costs	Person Months (Cal/Academic/ Summer)
The major goals of this project are		

OVERLAP (summarized for each individual)

Please refer to the Biographical Sketch sample (<u>http://grants.nih.gov/grants/funding/424/SF424R-</u><u>R_biosketchsample_VerC.docx</u>) in order to complete sections A, B,2C, and D of the Biographical Sketch.

Introduction: (2 -page limit)

Specific Aims: (1-page limit)

Research Strategy: (6-page limit)

Bibliography: (3-page limit)

Letters of Support or Collaboration:

Appendix: