

**American Shoulder and Elbow Surgeons
6300 N. River Road, Suite 727 • Rosemont, IL 60018-4226
(847) 698-1629 • FAX (847) 823-0536**

RESEARCH GRANT GUIDELINES

TABLE OF CONTENTS

Pages

- 2 Administrative Policies and Procedures**

- 3 Program Information**

- 4 - 6 Instructions for Completion of Application**

- 7 - 9 Guidelines**

ADMINISTRATIVE POLICIES AND PROCEDURES FOR RESEARCH GRANTS

1. **Objective:**

The objective of the research grant is to encourage new investigators by providing seed and start-up funding for promising research projects. Subject to the levels of philanthropic support, grants of up to \$20,000 for work to be performed over 12-24 months, will be considered.

2. **Eligibility:** See page 3, Section I. A.

3. **Deadline for Application:** September 9, 2010

4. **Period of Grant:** January 1 through December 31, 2011

5. **Amount:** \$20,000

6. **Items Required:**

_____ **Original and 10 Copies** of Application

_____ 10 Sets of Photographic Prints, if applicable

_____ Provide Animal IACUC approval, if applicable.

_____ Provide Human IRB statement, if applicable. X-rays are invasive procedures and require IRB approval.

_____ Provide statement clarifying the role of the orthopaedic surgeon in the project.

_____ Provide statement describing the relevance of the project to the mission statement of the American Shoulder and Elbow Surgeons.

7. **Mailing Instructions:**

Please mail complete application to:

American Shoulder and Elbow Surgeons
6300 N. River Road, Suite 727
Rosemont, IL 60018-4226

I. PROGRAM INFORMATION

A. Eligibility:

1. An orthopaedic surgeon must serve as the principal or co-principal investigator. Ph.D.'s or D.V.M.'s may serve as the principal or co-principal investigator, as long as they are affiliated with an orthopaedic department with an orthopaedic surgeon as the co-principal investigator. (A letter from the department chairman confirming this affiliation is required.)
2. The principal investigator must be working at an institution in North America.
3. An orthopaedic resident or fellow cannot apply for a Research grant.
4. The orthopaedic surgeon must provide a statement on time to be allocated to the project each week during the 24 month time period, including percent of time and use of time.
5. A candidate who has received an NIH RO 1 grant or its equivalent as a principal investigator, is not eligible for an ASES Research grant.
6. ASES will fund only one Research grant per institution per year.

B. Application Procedure:

1. Candidate must check yes on application if this is a resubmission. If so, **changes must be highlighted in bold type**. An application can be resubmitted only once.
2. The proposal must be single spaced. The height of the letters must not be smaller than 10 point. Type density must be no more than 15 cpi. Minimum margins must be 1/2 inch for left and right, 1 inch for top and bottom.
3. Total Research Plan is not to exceed ten (10) pages (see page 4).
4. If photographic prints are submitted, 7 sets are required. Please affix photos within the body of the grant.

C. Notification of Award:

The ASES will notify each applicant by letter after the Research Committee makes a final decision. This will allow the Investigator and Institution sufficient time to equip the lab and hire personnel for a March 1 starting date.

II. INSTRUCTIONS FOR COMPLETING RESEARCH GRANT APPLICATION

A. Face Page (AA) of application and Page AA-1:

1. Page AA is the cover sheet for the entire application. Please complete all sections. Page AA-1 requires information about the co-principal investigator and the institution's Financial Officer.
2. Signatures are required for principal and co-principal investigator, department chairman, other investigators associated with project (if applicable), the financial officer and the official authorized to sign for the institution. Please use blue ink for all required signatures.
3. On Page AA-1, please check off all categories that relate to the project.

B. Page BB:

1. Abstract of Research Plan: Provide a **100 word abstract** with 5 underlined phrases for project summary.
2. Performance Site(s): List name and location of site(s) where the work will be performed. Provide details on Page HH under Resources.
3. Key Personnel: List all personnel associated with the project. Provide details on page EE under Budget Justification.

C. Page CC:

Complete the Table of Contents. Please reference the page numbers of your application.

D. Pages DD and EE:

1. Enter budgets for initial budget period on page DD. Enter budget for all years for which funds are requested on Page EE. At bottom of Page EE, provide justification for each expense and category for each year.
2. Salaries and Wages: Enter the name, percent of time on project and salary requested, as well as normal fringe benefits, i.e., pay for vacation, sick days, and holidays charged to the grant. On budget justification page state what each person will be doing. No salary can be requested for principal investigator or co-principal investigator.
3. Permanent equipment: Any major piece of equipment or apparatus costing more than \$500.00 should be itemized, and justifications made.
4. Consumable supplies: Glassware, chemicals, supplies and all expendable materials obtained from the stockroom of the institution may be grouped in this category under appropriate subheading.
5. All other expenses:
 - a. Retirement plan and Federal Insurance Compensation Act employer contributions may be charged to grants, when such contributions are the normal practice of the institution. The percentage of such costs charged on behalf of a given individual must be calculated based on the percentage of that individual's salary charged to the grant. These expenditures must be shown in this category for approval.
 - b. Up to 200 reprints, without covers, of any paper carrying the credit line "Aided by a Grant from the American Shoulder and Elbow Surgeons" may be charged against the grant if the principal investigator so desires.
 - c. No travel funds can be charged against the grant.

- d. No overhead or indirect costs can be charged against the grant.
- E. Page FF:
Biographical sketches must be submitted for all investigators. **They may not exceed two pages for each person.** Please limit the information to experience relevant to the project and use the NIH format.
- F. Page GG:
1. Provide information on other support on continuation sheets in the **format** shown on Page GG. List research funding P.I. and Co-P.I. have received from ASES, if applicable. If candidate received ASES support for a research grant for a similar project, candidate must demonstrate that the project is being taken to a higher level of investigation and apply in the career category.
 2. List research funding relevant to this project for the past five years.
 3. List funding received for other research projects the last five years, including your own institution.
 4. List current funding, identifying potential overlap and no potential overlap of projects. On projects with funding of \$50,000 or more with potential overlap, both the P.I. and Co-P.I. must list the aims of their projects.
 5. If the P.I. has/had NIH funding, the P.I. is eligible for ASES funding if the grant was an NIH training grant. Candidate is not eligible for an ASES Research or Career grant if he/she was the principal investigator on a NIH RO 1 grant or its equivalent. The Co-P.I. on an ASES grant can have current/past NIH funding but must list project titles of all NIH funding.
- G. Page HH:
1. List facilities available at your institution. Include laboratory space and major equipment available for use with this investigation.
- H. Research Plan and Supporting Data:
1. Complete this section on continuation pages, giving details following the outline below. **The total proposal (a through d) can not exceed ten (10) pages.** If this is a resubmission, show changes **in bold type or in blue ink.**
 - a. Specific Aims - Provide testable hypotheses and concise statement of the aims of the proposed research. (Not to exceed one page).
 - b. Background and Significance - Summarize important results to date obtained by others on the problem, citing publications. Explain why the results of the proposed work may be important. (Not to exceed three pages).
 - c. Preliminary Studies - Describe briefly any work you have done that is particularly pertinent. On projects where human subjects are placed at some risk, where animals are used for experimentation or where there is a laboratory methodology with which the applying institution has not had well documented experience, the investigator is encouraged to submit a pilot study.
 - d. Research Design and Method - Give details of your research plan, including how the results will be analyzed. For each specific aim mentioned in "a", show how your plan is expected to fulfill the aim. Please include your specific plans for what you hope to accomplish in 6 months, 9 months and 12 months. Include method of statistical analysis, if relevant. Power studies justifying sample sizes, and therefore cost of the grant, would be strongly encouraged.

- e. Human Subjects - Attach a Human IRB statement, if applicable. IRB approval is required for invasive procedures.
- f. Vertebrate Animals - Attach a Vertebrate Animal IACUC approval, if applicable.
- g. Literature Cited - List material referenced in application.
- h. Role of the Orthopaedic Surgeon - Provide a statement, clarifying the role of the orthopaedic surgeon, stating significant part taken in the planning and/or execution of the design and analysis of model and time to be allocated to the project each week during the 24 month time period, including percent of time and use of time. Simple technical roles such as obtaining tissue samples at surgery or providing patients for analysis are not generally considered to be substantial roles.
- i. Relevance of the Project to the Mission of the American Shoulder and Elbow Surgeons :

The objectives of the American Shoulder and Elbow Surgeons are to furnish leadership, foster advances and enhance the study of shoulder and elbow surgery.

I. Correspondence:

Completed application and required copies should be directed to:

Chair, Research Committee
American Shoulder and Elbow Surgeons
6300 N. River Road, Suite 727
Rosemont, IL 60018-4226
PHONE: (847) 698-1629
FAX: (847) 823-0536

III. GUIDELINES

A. Fiscal Procedures and Policies:

1. Facilities to be provided by Grantee Institution:
 - a. Grantee institution is expected to provide all necessary, basic facilities and services. These include the facilities and services that normally could be expected to exist in any institution qualified to undertake orthopaedic research.
 - b. In particular, it is expected that the grantee institution will provide, whether from its own funds or from grant funds other than those of the ASES, the following, unless otherwise specifically agreed upon:
 - (1) Laboratory space
 - (2) Maintenance service, including maintenance, supplies and service contracts
 - (3) Telephone services
 - (4) Library service, including subscriptions to periodicals and the purchase of books
 - (5) Laboratory furniture
 - (6) Salary of principal investigator, co-principal investigator and of secretarial personnel
 - (7) All travel expenses of personnel working under the grant
 - (8) Worker's compensation, public liability or other hazard and special insurance
 - (9) Office equipment
 - (10) Employee group life, disability, medical expense or hospitalization insurance
 - (11) Lantern slides, color plates, etc.
 - (12) Hospital bed expense, nursing or related services, even though used for research studies.
 - (13) Indirect Costs
 - (14) Tuition expenses of personnel on grant.
2. As a matter of policy, ASES funds may not be used for remodeling or building construction costs.
3. Ownership of the Equipment - Equipment purchased under ASES grants become the property of the institution, unless otherwise specified by the ASES before termination of the grant or its extensions.

B. Budget Policies and Reports:

1. If approved budget is less than that requested, budget forms will be sent to grantee when notification of award is made. These forms must be completed, signed by the principal investigator and financial officer of the institution, and returned to the ASES for approval, within thirty (30) days after notification.
2. Reports of expenditures must be prepared every six months, be signed by the responsible financial officer, and submitted to the ASES for approval with accompanying documents. The approved financial report is returned to the financial officer with the grant payment. Expenses must be submitted by category, i.e., Salary and Wages, Equipment, Supplies, Animals, Other. Fifty percent (50%) of ASES funds must be spent before the next grant payment will be sent. The twelve-month report shall serve as the final report for one-year grants. It should be submitted no later than sixty (60) days after the grant has terminated.
3. Ten percent (10%) of grant funds will be withheld until the final report of expenses and the final report of the research is received at the ASES. Upon receipt of both reports, withheld funds will be sent to the grantee institution.
4. At expiration of grant, any unexpended balance of \$100.00 or more must be refunded to the ASES within sixty (60) days together with the report of expenditures and accompanying documentation, properly submitted.

5. Separate accounts must be maintained for each grant. These accounts, with substantiating invoices and payrolls, must be available at all times to ASES.
6. Grantee must request permission and receive written approval from the ASES prior to making any changes to approved budget.
7. Grantee may terminate a grant prior to normal expiration date by notifying the ASES office in writing and stating the reasons for termination. Unexpended funds must be returned to the ASES within sixty (60) days, together with a final report of expenditures. The ASES reserves the right to terminate grants at any time upon three months written notice.
8. If grantee has not completed the project prior to expiration, and for just reason, grantee may submit to the ASES Research Committee thirty days prior to expiration, a request for a no-cost extension, stating reason and requested period of extension. The Research Committee will refer the request to the Executive Committee for a decision and grantee will be advised.

C. Policy on Delinquent Financial/Research Reports

The ASES reserves the right to deny additional grants to any institution where after proper notification, an investigator has not submitted his/her final reports, and/or the financial officer has not submitted the final report of expenses, as required by ASES. This policy will be enforced when reports are one year past the final due date (18 months after the project ends). Upon receipt of these reports, the institution shall again become eligible for ASES grants.

D. Policy on Animals in Research

1. Use of animals and number requested for project must be justified by institution. If applicable, provide IACUC approval, regarding use of and number of animals requested for project.
2. All animals used in research supported by ASES grants must be acquired lawfully and be transported, cared for, treated and used in accordance with existing laws, regulations and guidelines. Decisions as to the kind and sources of animals that are most appropriate for particular studies must be made by scientists and institutions. ASES policy requires that such decisions be subject to institutional and peer review for scientific merit and ethical concerns and that appropriate assurances be given that NIH principles governing the use of animals are followed.

E. Policy on Human Subjects in Research

1. Use of human subjects and sample size must be justified. If applicable, IRB statements from your institution's human subjects committee must be provided. IRB approval is required for patients' X-rays.
2. ASES grantees are entrusted to assure adequate protection of human subjects. NIH regulations regarding human subjects should be followed.

F. Policy on Transfer of Grant

1. If the principle investigator is an orthopaedic surgeon and moves, the grant will remain at the funded institution and ASES will request the Co-P.I. or another investigator on the grant to take over as P.I.
2. If the principal investigator is not an orthopaedic surgeon and moves to a new institution, at any time during the grant, ASES will **not** consider moving the grant. The grant is terminated.
3. If the grant has not started at the first institution and the principal investigator moves to a new institution, the grant **will be canceled**. The principal investigator can re-apply from the new institution for the following year's funding.

4. If the principle investigator is an orthopaedic surgeon and moves, the request to take the grant to the new institution will be referred to the ASES Research Committee for a determination of the progress. A recommendation will be made to the Executive Committee for notification to the investigator. The investigator also must submit a letter enclosing resources, personnel and curriculum vitae of investigators at the new institution.
5. If the co-principal investigator leaves the project at any time during the life of the grant, the principal investigator must notify ASES and explain how the project will be completed in the absence of the investigator. If a new investigator has been assigned to the project, the investigator's curriculum vitae must be sent to ASES. The ASES Research Committee will review the grant and respond to the principal investigator.

G. Policy on Changing Aims of Grant

If the principal investigator and collaborators find that the original aims of the grant cannot be accomplished, and that to continue the project **substantial** changes in aims or methodology must be considered, the principal investigator must write to ASES, requesting permission to change the procedure and state the reasons for the change. The ASES Research Committee will respond to the principal investigator.

H. Progress Report and Final Reports

1. Grantees must submit a progress report at the completion of nine months. This allows time to set up the project and report on the progress to date. The investigator should pay close attention to the established milestones of what was to have been accomplished by the sixth month. It is extremely important that the investigator report these accomplishments, because the criteria established in the proposal will be used by the reviewers to determine if funding should be continued. Two copies of the report must be sent to the ASES. Upon receipt of an acceptable report the investigator will be notified of the second half of the funding.
2. Grantees are required to submit two versions of the final report to the ASES sixty days after termination of the grant. One version is the scientific report of the project. This report should refer to the original proposal so the reviewer can determine whether or not the goals of the research were accomplished. This mechanism will assure continuance of a quality control program that meets the highest scientific and academic standards. The second version of the final report is to be written in lay language for general understanding of the project and would be similar to a press release. Two copies of both reports must be sent to the ASES.
3. The ASES reserves the right to deny additional grants to any institution where the final reports have not been submitted within six months.

I. Publication

The ASES encourages free publication of research findings by grantees but requires that the following acknowledgment be used as a footnote on the first page of the text:

*"AIDED BY A GRANT FROM THE
AMERICAN SHOULDER AND ELBOW SURGEONS"*

Also, when a grantee presents a paper at a professional scientific meeting, the above credit line must be included.

The ASES should be sent reprints of all papers and publications resulting from work done under a grant, even those that appear after the grant has been terminated.

The ASES imposes no restrictions on copyrighting publication by grantees.

J. Patents

If any patents accrue from investigations supported by grants funded by the ASES, the ASES reserves the right to negotiate a proportionate interest in the royalties.

Research Grant Application American Shoulder and Elbow Surgeons 6300 N. River Road, Suite 727 Rosemont, IL 60018-4226 <i>Follow Instructions Carefully</i>		This Grant Application is a Resubmission YES NO	
1. TITLE OF PROJECT			
2. PRINCIPAL INVESTIGATOR INFORMATION <i>(See Page AA-1 For Co-Principal Investigator Information)</i>			
2a. NAME: (Last, First, Middle)		2b. DEGREES:	2c. SOCIAL SECURITY #:
2d. POSITION TITLE:		2e. MAILING ADDRESS (Street, City, State, Zip)	
2f. DEPARTMENT, SERVICE, LABORATORY OR EQUIVALENT		e-mail	
2g. TELEPHONE AND FAX (Area code, number, extension) Tel.: Fax:			
3. HUMAN SUBJECTS: YES NO		4. VERTEBRATE ANIMALS: YES NO	
3a. If "YES", Exemption #: or IRB Approval Date: Full IRB Expedited Review		4a. If, "YES", IACUC IRB approval date	
		4b. Animal Welfare Assurance #:	
5. DATES OF PROPOSED PERIOD OF SUPPORT: (MM/DD/YY) From: Through:	6. COSTS REQUESTED FOR EACH YEAR: YEAR 1 YEAR 2		7. TOTAL COSTS REQUESTED:
8a. APPLICANT ORGANIZATION:		8b. Address	
Name:			
9. DEPARTMENT CHAIR		10. OFFICIAL SIGNING FOR APPLICANT ORGANIZATION <i>(Administrative Official to be notified if Award is Made)</i>	
Name:		Name:	
Title:		Title:	
Street Address:		Street Address:	
City, State, Zip:		City, State, Zip:	
Phone:		Phone:	
Fax:		Fax:	
Signature: _____		Date:	
Date:			
11. PRINCIPAL INVESTIGATOR ASSURANCE: <i>I certify that the statements herein are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to administrative penalties. I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of this application</i>		SIGNATURE OF PI NAMED IN 2a: <i>(In ink. "Per" signature not acceptable.)</i>	Date:
12. APPLICANT ORGANIZATION CERTIFICATION AND ACCEPTANCE: <i>I certify that the statements herein are true, complete and accurate to the best of my knowledge, and accept the obligation to comply with ASES terms and conditions if a grant is awarded as a result of this application. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to administrative penalties.</i>		SIGNATURE OF OFFICIAL NAMED IN 10: <i>(In ink. "Per" signature not acceptable.)</i>	Date:

13. CO-PRINCIPAL INVESTIGATOR INFORMATION

13a. NAME: (Last, First, Middle)	13b. DEGREES:	13c. SOCIAL SECURITY #:
13d. POSITION TITLE:		13e. MAILING ADDRESS (Street, City, State, Zip)
13f. DEPARTMENT, SERVICE, LABORATORY OR EQUIVALENT		
13g. TELEPHONE AND FAX (Area code, number, extension) Tel.: Fax:		
13.h. SIGNATURE OF CO-PRINCIPAL INVESTIGATOR		

14. FINANCIAL OFFICER INFORMATION

14a. FINANCIAL OFFICER	
Name:	Phone:
Title:	Fax:
Street Address:	e-mail:
City, State, Zip:	
14b. SIGNATURE OF FINANCIAL OFFICER:	

15. ADDITIONAL INVESTIGATOR INFORMATION

15. NAME AND SIGNATURE OF ADDITIONAL INVESTIGATOR(S) <i>(If Applicable)</i>	
1). NAME: _____	SIGNATURE: _____

2). NAME: _____	SIGNATURE: _____

Check below all categories that relate to this project.

*Number them 1, 2, 3 in order of relevance to the project - with 1 being the most applicable to the project, etc.
This will enable ASES to report on the use of our grant funds.*

- | | | |
|------------------------------------------------------|-------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> General Individual Research | <input type="checkbox"/> Shoulder/Elbow | <input type="checkbox"/> Biomaterials |
| <input type="checkbox"/> Adult Spine | <input type="checkbox"/> Sports Medicine | <input type="checkbox"/> Molecular Biology |
| <input type="checkbox"/> Children's Orthopaedics | <input type="checkbox"/> Trauma | <input type="checkbox"/> Microscopy |
| <input type="checkbox"/> Foot & Ankle | <input type="checkbox"/> Outcomes | <input type="checkbox"/> Epidemiology |
| <input type="checkbox"/> Hand & Upper Extremity | <input type="checkbox"/> Clinical Science | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hip & Knee | <input type="checkbox"/> Biology | |
| <input type="checkbox"/> Oncology | <input type="checkbox"/> Biochemistry | |

ABSTRACT OF RESEARCH PLAN: Please provide a 100 word executive summary with 5 underlined phrases for planned project in the box below. 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 these goals at 6 and 12 month timelines. Avoid summaries of past accomplishments and the use of the first person. This description is meant to serve as a succinct and accurate description of the proposed work when separated from the application.
DO NOT EXCEED THE SPACE PROVIDED.

PERFORMANCE SITE(S) (*organization, city, state*) Indicate where the work described in the Research Plan will be conducted. If there is more than one performance site, list all the sites, including V.A. facilities and provide an explanation on the Resources page (HH) of the application.

KEY PERSONNEL. Use continuation pages as needed to provide the required information in the format shown below. Describe specific functions under justification on form Page EE.

<u>Name</u>	<u>Organization</u>	<u>Role on Project</u>
		Principal Investigator
		Co-Principal Investigator

Type the name of the principal investigator at the top of each printed page and each continuation page.

**RESEARCH GRANT
TABLE OF CONTENTS**

Page Numbers

Face Page 1

Co-Principal Investigator/Financial Officer 2

Abstract, Performance Sites and Personnel..... 3

Table of Contents 4

Detailed Budget for Initial Budget Period 5

Budget for Entire Proposed Period of Support 6

Biographical Sketch- Principal Investigator and Co-Principal Investigator (*Not to exceed two pages each*) 7 - ____

Other Biographical Sketches (*Not to exceed two pages for each.*)..... ____

Other Support ____

Resources..... ____

Research Plan

(Items a-d: not to exceed 10 pages)

- a) Specific Aims..... ____
- b) Background and Significance..... ____
- c) Preliminary Studies/Progress Report ____
- d) Research Design and Methods..... ____
- e) Human Subjects..... ____
- f) Vertebrate Animals..... ____
- g) Literature Cited..... ____
- h) Role of the Orthopaedic Surgeon..... ____
- i) Relevance of the Project to the Mission of ASES ____

DETAILED BUDGET FOR INITIAL BUDGET PERIOD	FROM	THROUGH
--------------------------------------------------	------	---------

PERSONNEL *(Applicant organization only)*

DOLLAR AMOUNT REQUESTED *(omit cents)*

NAME	ROLE ON PROJECT	% EFFORT ON PROJECT	SALARY REQUESTED	FRINGE BENEFITS	TOTALS
	Principal Investigator				

SUBTOTALS →			
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PERMANENT EQUIPMENT <i>(Itemize)</i>	
CONSUMABLE SUPPLIES <i>(Itemize by category)</i>	
ANIMALS AND ANIMAL CARE	
ALL OTHER EXPENSES <i>(Itemize by category)</i>	
TOTAL COSTS FOR INITIAL BUDGET PERIOD <i>(Item 6, Face Page)</i> →	\$

BUDGET FOR ENTIRE PROPOSED PERIOD OF SUPPORT

BUDGET CATEGORY TOTALS	INITIAL BUDGET PERIOD (From PAGE 5)	YEAR 2
PERSONNEL-Salary and fringe benefits. Applicant organization only.		
PERMANENT EQUIPMENT		
CONSUMABLE SUPPLIES		
ANIMALS AND ANIMAL CARE		
ALL OTHER EXPENSES		
TOTAL COSTS		

TOTAL COSTS FOR ENTIRE PROPOSED PERIOD OF SUPPORT (Item 7, FACE PAGE)	\$
------------------------------------------------------------------------------	-----------

JUSTIFICATION: Follow the budget justification instructions in the ASES guidelines exactly. Use continuation pages as needed.

BIOGRAPHICAL SKETCH

*Provide the following information for the key personnel in the order listed on PAGE 3.
Photocopy this page or follow this format for each person.*

NAME	POSITION TITLE	SOCIAL SECURITY #	BIRTHDATE

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education and include postdoctoral training.*)

INSTITUTION /CITY/STATE	DEGREE(S)	YEAR(S)	FIELD(S) OF STUDY

RESEARCH AND/OR PROFESSIONAL EXPERIENCE: Concluding with present position, list in chronological order previous employment, experience, and honors over the past 10 years. Provide a clear statement on your credentials and how they relate to this project. List, in chronological order, the complete references to all publications during the past three years and prior publications pertinent to this application. DO NOT EXCEED TWO PAGES, INCLUDING PAGE 7.

OTHER SUPPORT

There is no form page for *Other Support*.

Information on Other Support should be provided in the format shown below, using continuation pages.

Include the Principal Investigator's name at the top and number consecutively with the rest of the application.

Please list ASES first.

Format

NAME OF INDIVIDUAL		
<u>ACTIVE/PENDING</u>		
Project Number (Principal Investigator) Source Title of Project (or Subproject)	Dates of Approved/Proposed Project Annual Costs	% Effort
The major goals of this project are...		
<u>OVERLAP</u> (summarized for each individual)		

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:

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

CONTINUATION PAGE