

Resubmission <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, would like us to contact the same reviewers that previously reviewed your proposal <input type="checkbox"/> Yes <input type="checkbox"/> No	
1. TITLE OF PROPOSAL (Do not exceed 81 characters, including spaces and punctuation.): 	
PRINCIPAL INVESTIGATOR (PI)	
NAME:	Role on project:
POSITION TITLE:	DEGREE(S)
DEPARTMENT, LABORATORY, OR EQUIVALENT:	DIVISION/SECTION:
CONTACT INFORMATION: TEL: _____ FAX: _____ Email: _____	
KEY PERSONNEL (must include Co-PI if PI is fellow, resident, or courtesy/associate staff member)	
NAME:	Role on project:
POSITION TITLE:	DEGREE(S)
DEPARTMENT, LABORATORY, OR EQUIVALENT:	DIVISION/SECTION:
CONTACT INFORMATION: TEL: _____ FAX: _____ Email: _____	
ADDITIONAL STUDY PERSONNEL – please provide name or TBD if not known and role on study	
HUMAN SUBJECTS RESEARCH: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, was this proposed research submitted to the IRB (x67217): <input type="checkbox"/> Yes <input type="checkbox"/> No* Submission Date: _____ *If no, please note that all proposals involving human subjects must be submitted to IRB for review no later than 30 days after submission of application to Einstein Society for funding.	
INVOLVES LIVE VERTEBRATE ANIMALS: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, was this proposed research submitted to the IACUC (x67159): <input type="checkbox"/> Yes <input type="checkbox"/> No* Submission Date: _____ *If no, please note that all proposals involving live vertebrate animals must be submitted to IACUC for review no later than 30 days after submission of application to Einstein Society for funding.	
What proportion of the proposed research will be conducted at AEHN? If your answer is less than 100%, please explain and give your rationale.	

If the proposed research leads to the submission of extramural research proposals in the future, will those proposals be submitted with AEHN as the primary applicant organization? Yes No Not sure

If the answer is “No,” or “Not Sure,” please explain and give your rationale.

Financial Support Requested: \$

List additional sources from which funds for this project are being/have been sought:

List other current research support giving source, amount, project dates, brief description and indicate overlap with present project.

Signature of the principal investigator

Date

I have reviewed this proposal and find it to have scientific merit, to be feasible to conduct and complete within the proposed time period and the budget is appropriate.*

Name of Department Chairman:

Signature of the Department Chairman

Date

* If the proposal is seen as not having enough scientific merit or being not feasible to conduct and complete within the proposed time frame or the budget is not appropriate, the Department Chair should communicate these opinions back to the Principle Investigator and suggest appropriate changes to the proposal. The Department Chair will share oversight responsibility during the course of the project with the Director of Research and Technology Development and the Chair of the Research Subcommittee of the Medical Staff.

NOTE:

The printed and signed copy of all required application documents, including Biosketch(s), plus an electronic copy must arrive at the Office for Research and Technology Development, Korman 100, by 5:00 pm on January 1st (first cycle) or July 1st (second cycle). No application will be accepted after the deadline.

CHECK LIST

Required application forms	Yes	No
Albert Einstein Society research grant proposal form	<input type="checkbox"/>	<input type="checkbox"/>
Abstract in layman's terms	<input type="checkbox"/>	<input type="checkbox"/>
Copy of detailed protocol* (limited to maximum of 20 pages, attach as word document)	<input type="checkbox"/>	<input type="checkbox"/>
Proposed budget and budget justification sheet	<input type="checkbox"/>	<input type="checkbox"/>
Signed human subjects and animal use certification form	<input type="checkbox"/>	<input type="checkbox"/>
Biosketch for PI and any Co-PIs	<input type="checkbox"/>	<input type="checkbox"/>
List of potential outside reviewers	<input type="checkbox"/>	<input type="checkbox"/>
Letter to the reviewers (for resubmissions only) OPTIONAL	<input type="checkbox"/>	<input type="checkbox"/>

***Protocol must follow TEMPLATE: Human Research Protocol.**

For studies that do not involve human subjects or their data (e.g. animal or lab-based studies) that required protocol sections are as follows:

- a) Research objective(s) or specific aim and hypotheses
- b) Summary of background for study and related literature
(may use google scholar <http://scholar.google.com> or pubmed for literature search)
- c) Statement on importance of project (i.e. identify need or knowledge gap this research will address)
- d) Detailed description of inclusion/exclusion criteria for research subjects and procedures including data collection methods, planned intervention etc.
- e) Plan for data analysis
- f) Proposed 12 month timeline for project from initiation to completion (see samples of time lines on shared drive)
- g) Statement on feasibility of conducting and completing project within the proposed time frame and budget
- h) Plans for continuing research after current project is completed (e.g. submission of application for external funding) and/or plans for publication/presentation of results
- i) Reference list

See separate biosketch form and instructions provided on shared drive in IRB forms folder under RSC AES application – guidelines.

Title of Project:

ABSTRACT IN LAYMAN'S TERMS (one page maximum, use standard font size of 12)

Title of Project:

PROPOSED BUDGET (plan for a 12 month project period)

A. PERSONNEL (List personnel who will receive salary support and their role on project)	Amount (in US dollars)
Benefits @ 22% (total)	
Category total	
B) PERMANENT EQUIPMENT (Itemize)	
Category total	
C) CONSUMABLE SUPPLIES (Group in Major Categories)	
Category total	
D) MISCELLANEOUS (List specific amount for each item)	
Category total	
GRAND TOTAL (Cannot exceed \$ 35,000.00)	

Title of Project:

BUDGET JUSTIFICATION SHEET

Please use this sheet to detail and justify your budget. The budget is not to exceed \$35,000.
If salary is included as an expense, you must also include fringe benefits at a rate of 22%.

1. NAME OF PRINCIPAL INVESTIGATOR:
2. TITLE OF PROJECT:

CERTIFICATION FOR PROTECTION OF HUMAN SUBJECTS

RESEARCH INVOLVING HUMAN SUBJECTS

Safeguarding the rights and welfare of human subjects involved in activities supported by grants from the **Albert Einstein Society is the responsibility of the principal investigator who receives the funds awarded.** In order to provide for the adequate discharge of this responsibility, no grant for an activity involving human subjects shall be made unless the application for such support has been reviewed and approved by an appropriate institutional committee.

- This application does not propose any activities that would involve human beings as research subjects or their personal data.
- This is to CERTIFY that this application does propose activities involving human subjects has been or will be reviewed and approved by our Institutional Review Board (IRB) before the study begins in accordance with institutional policy.

If already approved, date:
 (The review date must be recent; certification is invalid if review date would precede award date by more than one year).

CERTIFICATION FOR CARE AND TREATMENT OF LABORATORY ANIMALS

RESEARCH INVOLVING LABORATORY ANIMALS

The proper care and humane treatment of laboratory animals involved in activities supported by grants from the Albert Einstein Society is of the responsibility of the principal investigator who receives the funds awarded. In order to provide for the adequate discharge of this responsibility, no grant for an activity involving laboratory animals shall be made unless the application for such support has been reviewed and approved by an appropriate institutional committee.

- This application does not propose any activities that would involve laboratory animals.
- This is to CERTIFY that this application, which does propose activities involving laboratory animals has been or will be reviewed and approved by our Institutional Animal Care and Use Committee (IACUC) before the study begins in accordance with current institutional policy.

LIST SPECIES OF LABORATORY ANIMALS TO BE USED:

Signature of Principal Investigator

Date