2019 Spring Medical Research Application

Robert J. Kleberg, Jr. and Helen C. Kleberg Foundation

Instructions

This application is for **medical research related requests** only. This includes medical research studies, medical animal research studies, and medical research faculty requests. Use the '2019 Spring General Grant Application' for all other requests.

Review the Grant Guidelines on our website at www.klebergfoundation.org for instructions on how to apply. Review the application questions and required attachments by clicking 'Print Questions' on this screen or from the Logon page.

This application employs many forms similar to a National Institutes of Health (NIH) application. Please refer to the NIH guidelines at https://grants.nih.gov/grants/funding/phs398/phs398.pdf for definitions of terms. Download the Foundation's Medical Research Budget form to complete and submit with your application. Applications must be submitted before midnight CST on Sunday, March 31. Late submissions cannot be accepted.

Questions and attachments with an asterisk (*) are required and must be answered or uploaded before you can submit. Questions without an asterisk are optional and should be answered if they apply. Answers are automatically saved and you do not have to complete the application in one session.

For questions, contact Margret Bamford at margretb@alexventures.com or call 210-316-8398 if urgent.

I. Organization Information

Organization Name*
Character Limit: 150

Other Name Used
If you are doing business under a different name, list your d/b/a name here.

Character Limit: 150

Organizations Doing Business Under Another Name

If the organization is doing business under another name than its legal name, upload a scanned copy of the documentation from the applicable state/government entity, generally the secretary of state's office, recognizing the d/b/a name.

File Size Limit: 1 MB

Organization Verification*

Please review and verify the organization and contact information for this account in the online system; make any needed corrections. By clicking Yes, you confirm that you have done so and that the information for this account is correct and up to date. Contact Margret Bamford at 210-271-3691 if changes need to be made.

Choices

Yes, the organization and contact information is correct.

Organizational Development

Use this space to highlight any significant organizational developments or changes that might impact or relate to your study or field of study, if any.

Character Limit: 1300

Requested By Name*

For universities or medical schools, the Provost, Chancellor, President, or Executive Vice President overseeing <u>all</u> research should submit the request letter. Enter the **name only** (no credentials) of this person (the Officer) who will sign the request letter using this **format:**
Robert Smith

Character Limit: 35

Requested by Salutation*

i.e.: Dr., Ms., Mr., or Mrs.

Character Limit: 5

Requested By Title*

Title of the Officer who will sign the request letter.

Character Limit: 50

Requested By Mailing Address*

Enter the Officer's mailing address.

Character Limit: 250

FedEx Address*

Enter the contact name, mailing address, and phone number for the person who could receive a FedEx delivery of an award letter and check, should a grant be awarded.

Character Limit: 250

Cover Letter*

A short request letter that includes a brief description of the request, the amount requested, request period, how this research will be transformative, and the reasons why this principal PI and this study was selected above all other possible requests; this should be signed by the person listed above. This letter must be in pdf format.

File Size Limit: 2 MB

IRS Ruling*

A scan copy of the IRS ruling or determination letter (see grant guidelines on our website for details).

File Size Limit: 1 MB

II. Request Details and Research Plan

Executive Summary*

Provide a succinct, stand-alone description of the proposed work. This summary should describe the overall goals and specific aims, the underlying background, designs, and methods to be followed, expected results, and relevance to the field. **The Executive Summary should be written in layman terms that is understandable by a general audience.**

Character Limit: 2500

This section should be written in terms that are understandable to a medical researcher who may not necessarily have conducted research in your focus area.

Study Title*
Character Limit: 120

Amount Requested*

Total amount of your request. If this is a multi-year request, provide the total amount requested for all years combined. Please note that the Foundation generally does not provide funding for more than 3 years and does not fund organization indirect or administrative costs, or overhead allocations.

Character Limit: 20

Enter the amount requested for each year. Enter the number zero for all years beyond those for which you are requesting funding.

Year 1 Request*
Character Limit: 20

Year 2 Request*
Character Limit: 20

Year 3 Request*
Character Limit: 20

Year 4 Request*
Character Limit: 20

Year 5 Request*
Character Limit: 20

Study Cost*
Provide the **total cost** of the study for the years of your request. This will be greater than your request unless you are asking the Foundation to cover the entire cost of the study.
Character Limit: 20

Begin Date*
Beginning date of the grant period or proposed period of support.
Character Limit: 10

End Date*
Ending date of the grant period or proposed period of support.
Character Limit: 10

Principal Investigator*
Provide the full name of the **primary** principal investigator responsible for carrying out the study using this **format: Dr. Joseph K. Smith**
Character Limit: 50

Principal Investigator Information*
Provide the **primary** principal investigator's title and credentials and highlight current and past affiliations.
Character Limit: 2000

Additional Investigators
Provide the names and academic credentials only of additional principal investigators or co-investigators participating in the study, if any. Enter one name with academic credentials per line.
Character Limit: 250

Additional Investigator Information*
Provide the titles and highlight the credentials and current and past affiliations of any additional investigators.

Character Limit: 3000

Key Staff

Provide the names and titles of other key staff and their involvement in the study, if any, and describe how the study will be overseen, as appropriate.

Character Limit: 1000

Will the work described in the Research Plan be conducted at more than one site?*

Choices

Yes

No

Project Address*

Please provide the physical address for all sites where the work will be conducted. List the address of the applicant organization site first.

Character Limit: 500

Request Type*

Choices

Basic Science Medical Research

Translational or Clinical Medical Research

Both

Medical Focus Area*

Please check the general medical focus area where your proposed study best fits.

Choices

Allergy and Immunology

Biochemistry

Cardiology

Dermatology

Dietetics

Embryology

Endocrinology

Gastroenterology

Genetics

Hepatology

Immunology

Infectious Disease

Nephrology

Neurology

Oncology

Ophthalmology

Personalized Medicine

Psychiatry

Pulmonology

Rheumatology
Toxicology
None of these

If None of These, please list
Character Limit: 60

Specific Aims*
Describe the specific aims of the proposed research, how each will be accomplished, and the impact on the research field involved. List specific objectives, e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, develop new technology, etc.

If Entering Text Only, *PLEASE* enter your text directly into this text box, do not upload it as a separate document. If you wish to include exhibits, charts, graphics or tables, insert these into your document, upload it as a pdf copy here, and leave this text box blank. Limit your pdf upload file to **2 pages;** clearly label it as Specific Aims.

Character Limit: 4000 | File Size Limit: 3 MB

Preliminary Work
Briefly describe any preliminary work. **If Entering Text Only, *PLEASE* enter your text directly into this text box, do not upload it as a separate document.** If you wish to include exhibits, charts, graphics or tables, insert these into your document, upload it as a pdf copy here, and leave this text box blank. Limit your pdf upload file to **2 pages;** clearly label it as Preliminary Work.

Character Limit: 3000 | File Size Limit: 3 MB

Research Strategy*
Describe your research strategy, addressing the following areas as applicable: significance to the field; innovation; study approach in terms of methodology, experimental procedures and analyses used to accomplish the specific study aims; the outcomes expected including possible unanticipated developments; and feasibility and high risk aspects of the proposed work. If vertebrate animals are involved, provide details in a subsequent question of this section.

If Entering Text Only, *PLEASE* enter your text directly into this text box, do not upload it as a separate document. If you wish to include exhibits, charts, graphics or tables, insert these into your document, upload it as a pdf copy here, and leave this text box blank. Limit your pdf upload file to **6 pages;** clearly label it as Research Strategy.

Character Limit: 10000 | File Size Limit: 4 MB

Literature Cited
File Size Limit: 1 MB

Population Most Impacted

Please explain if your study focuses on a specific demographic segment of the population.

Character Limit: 500

Project Collaboration, Consultants, Consortium

If applicable, describe other organizations, consultants or companies with whom you have contractual or formal arrangements regarding this study or its outcomes, the nature of your arrangement(s) and how you will work together.

Character Limit: 1500

Vertebrate Animals*

Does your study involve vertebrate animals?

Choices

Yes
No

Vertebrate Animal Certification

If your study involves vertebrate animals, does it conform with NIH requirements (page I-47) found at http://grants.nih.gov/grant/funding/phs398/phs398.pdf? You may be asked to provide substantiating documents, if funded.

Choices

Yes
No

Vertebrate Animals Details

If your study involves vertebrate animals, please describe the animals and proposed procedures following NIH guidelines, addressing the five points listed by NIH. See http://grants.nih.gov/grants/funding/phs398/phs398.pdf on page I-47.

Character Limit: 2000

Human Subjects*

Does your study involve human subjects?

Choices

Yes
No

Human Subject Certification

If your study involves human subjects, does your study conform to NIH requirements for the Protection of Human Subjects as described in the NIH application (page I-46) and Supplemental Instructions Part II of the PHS 398 found at http://grants.nih.gov/grants/funding/phs398/phs398.pdf? You may be asked to provide substantiating documents if funded.

Choices

Yes
No

Human Embryonic Stem Cells*

Does your study involve human embryonic stem cells?

Choices

Yes
No

Human Embryonic Stem Cell Certification

If your study involves human embryonic stem cells, will the line used be one from the stem cell registry? See NIH requirements (page I-32) at http://grants.nih.gov/grants/funding/phs398/phs398.pdf. You may be asked to provide substantiating documents, if funded.

Choices

Yes
No

III. Project Budget and Funding

Download the Foundation's Medical Research Study Project Budget file by clicking **HERE.** You must use this budget file.

This study budget is similar to NIH Form Page 5, see https://grants.nih.gov/grants/funding/phs398/phs398.pdf for definition of terms. Follow the instructions in the Foundation's budget file. **The budget has two sections: 'Total Medical Study Budget' and 'Request From Foundation.' Both must be completed, even if they are the same** (i.e., if you ask the Foundation to cover the entire cost of the study). Do not include organization indirect or administrative costs, or overhead allocations, in your request from the Foundation.

This file also includes a **worksheet asking about other funding** you have secured or will be requesting. Please make sure you **also complete this funding worksheet.** Save this file to your computer for your annual Evaluation Report, should your request be approved. **Requests that do not use the Foundation's Excel Budget file will not be considered.**

Project Budget*

Upload your completed Medical Research Study Project Budget file (excel format). You are able to download this file in the Budget section of this application. **DO NOT UPLOAD A DIFFERENT FILE.**

File Size Limit: 2 MB

Project Budget Justification

Please explain any unusual items, special considerations, or line items that are not self-explanatory in your excel project budget file.

Character Limit: 6500

Project Funding

Please include any other pertinent information on how this project will be funded beyond the information provided in the excel Project Budget file.

Character Limit: 4000

Research Continuation

Describe your plans for continued research on this topic after completion of this proposed study, if any, and how you expect to fund this effort.

Character Limit: 2000

IV. Biographical Sketch and Curriculum Vitae

Biographical Sketch - Primary Principal Investigator responsible for study*

Please format the biographical sketch according to NIH specifications and limit it to five pages. The NIH format can be found at http://grants.nih.gov/grants/funding/phs398/phs398.pdf on page I-36.

File Size Limit: 1 MB

Biographical Sketch - Second Principal Investigator or Co-Investigator

Please format the biographical sketch according to NIH specifications and limit it to five pages.

File Size Limit: 1 MB

Biographical Sketch - Third Principal Investigator or Co-Investigator

Please format the biographical sketch according to NIH specifications and limit it to five pages.

File Size Limit: 1 MB

Curriculum Vitae - Primary Principal Investigator responsible for study*

File Size Limit: 2 MB

Curriculum Vitae - Second Principal Investigator or Co-Investigator

File Size Limit: 2 MB

Curriculum Vitae - Third Principal Investigator or Co-Investigator

File Size Limit: 2 MB

THANK YOU FOR YOUR TIME AND EFFORT IN COMPLETING THIS APPLICATION!

Your request will be considered at the June 12 board meeting. You will receive an email no later than June 14 notifying you of the board's decision.