

## **Clinical Translational Research Mentored Scholar Program (CTR-MSP) Pilot Research Fund Procedures and Guidelines**

**Who:** This pilot grant is reserved for Clinical Translational Research Mentored Scholar Program (CTR-MSP) scholars to generate preliminary data needed for successful extramural grant applications.

**When:** Scholars can apply as soon as they have formalized their project with their graduate advisor and mentorship team, and their primary mentor has read and approved the application.

**How much:** \$25,000 that can be supplemented by the [Research Support Fund \(RSF\)](#) for clinical expenditures or any other funds available through their department or [other sources](#).

**Restrictions on categories of expenditures:** Outside of direct research expenses, it can cover Scholar tuition and other educational fees, as well as stipends for Scholar's graduate students, research coordinator salary. However, it cannot cover any faculty salary other than for specific research support services (CCORDA, RITO, Bioinformatics). It cannot be used for facilities updates, including office or purchase of computer equipment unless tied to another piece of research equipment. Food and/or travel is only allowed for the research itself, not to travel to a national meeting to present the work or entertaining a consultant.

**Application elements:** Includes the following:

- The face page below, which requires signature of your mentor that they read and approved
- Research proposal: 7 page maximum (11 point minimum, margins of >0.08 inch, single (1) line spacing)
  - Specific aims page: Summarizes rationale, hypothesis and specific aims. If part of another grant application, include only or show the focus of this proposal within the context of the greater application
  - Remaining 6 pages: Significance, innovation, and methods sections, including a biostatistics section with sample size analysis, if applicable, and the published program announcement, RFA or funding agency priority towards which it is directed.
- Appendix (not included in 7 page limit):
  - References
  - Human or animal sections required, per NIH format
  - Data Safety Monitoring
  - Documentation of IRB, IACUC or other regulatory approvals if received
- Formal budget and budget justification (see forms attached), and include budget pages of any funding that might overlap
- NIH biosketch using the new format.
- [Planned enrollment table in NIH format if recruiting](#) human subjects or involving biological samples.

**Checklist of Pilot Grant application elements:**

<b>Due Date</b>	<ul style="list-style-type: none"> <li>• Three weeks prior to the monthly Review Committee meeting. (CTR Review Committee meets on the 2nd Tuesday of the Month)</li> </ul>
<b>Application</b>	<ol style="list-style-type: none"> <li>1. Scholar completes application and submits pdf by single email to. <ol style="list-style-type: none"> <li>a. LuAnn Larson <a href="mailto:llarson@unmc.edu">llarson@unmc.edu</a></li> <li>b. Molly Cowgill <a href="mailto:molly.cowgill@unmc.edu">molly.cowgill@unmc.edu</a></li> <li>c. Dr. Lani Zimmerman <a href="mailto:lzimmerman@unmc.edu">lzimmerman@unmc.edu</a></li> <li>d. Dr. Kaleb Michaud, Chair of the Scientific and Pilot Grant Review Committee, <a href="mailto:kmichaud@unmc.edu">kmichaud@unmc.edu</a></li> <li>e. Your mentor(s).</li> </ol> </li> <li>2. Regulatory body applications (e.g., IRB/IACUC) can be submitted simultaneous to the CTR-MSP grant application, but approvals have to be obtained from those entities prior to funds being released.</li> </ol>
<b>Review</b>	<ul style="list-style-type: none"> <li>• The Scientific and Pilot Grant Review Committee will review the application, to include a designated biostatistics reviewer and a Research Subject Advocate reviewer.</li> <li>• Any concerns identified by the review committee need to be formally addressed by the Scholar before final approval is given.</li> <li>•</li> </ul>
<b>Final approval and award</b>	<ul style="list-style-type: none"> <li>• Once you receive notification of your approval from the Scientific and Pilot Grant Review Committee and have the appropriate required regulatory bodies approval, send them on to Molly Cowgill cc to Dr. Zimmerman</li> <li>• Molly Cowgill will submit all completed materials to Dr. Larsen's office for funding approval.</li> <li>•</li> </ul>
<b>Budget</b>	<ul style="list-style-type: none"> <li>• Budget on attached form with separate justification page.</li> <li>• For approval of reallocation of budget, please submit the rationale with justification to Veronica Jones <a href="mailto:veronica.jones@unmc.edu">veronica.jones@unmc.edu</a> for Dr. Larsen's approval</li> </ul>
<b>Funding Limitations</b>	<ul style="list-style-type: none"> <li>• There is a \$25,000 funding limit maximum x 1 year.</li> <li>• No travel unless related to data collection, for subjects, or for a consultant; no international travel unless preapproved by Dr. Larsen's even if related to the research.</li> <li>• No faculty or PI salary allowed on the grant.</li> <li>• No F &amp; A. (facilities and administrative costs)</li> <li>• No office/computer equipment unless justified for the research itself</li> <li>• Food is only allowed for the research itself.</li> <li>• No alcohol, unless specifically being studied in the research..</li> </ul>
<b>Cost Center</b>	<ul style="list-style-type: none"> <li>• A cost center will be provided to the PI once approval from VCR office is given. Instructions on the use of the cost center will also be provided at that time.</li> </ul>
<b>Post-award Requirements:</b>	<ul style="list-style-type: none"> <li>• For all approved and funded projects, investigators must agree to provide annual reports of progress including manuscripts, presentations, and submission or funding of new grant proposals for 3 years.</li> <li>• Notify Molly Cowgill when grant and funding are done.</li> </ul>

- Questions or concerns about submission should be addressed to: LuAnn Larson, RN, BSN, CCRP Clinical Research Center, Zip 1230 [llarson@unmc.edu](mailto:llarson@unmc.edu) 402-559-8555
- Questions or concerns about budget and annual reports should be addressed to: Molly Cowgill, MHR, [molly.cowgill@unmc.edu](mailto:molly.cowgill@unmc.edu) 402-559-5141

UNMC Internal Grant Mechanism Front Sheet  
<https://www.unmc.edu/vcr/funding/internal-funding-opps.html> (Fillable Forms)

Date: \_\_\_\_\_ RFA Mechanism: \_\_\_\_\_  
 Proposal Title: \_\_\_\_\_  
 Principal Investigator: \_\_\_\_\_  
 College/Department: \_\_\_\_\_ Division/Unit: \_\_\_\_\_  
 Campus Zip: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Collaborators, Co-Investigators including institution and role: \_\_\_\_\_

Total Budget Requested: \_\_\_\_\_

**Please check all Regulatory approvals required for this proposal and current status**

Regulatory approval/process	Status (Not Applicable/ Pending/Approved/Exempt)	Protocol #/ Date of Approval
IRB		
IACUC		
IBC (Biosafety Committee)		
Stem Cells		

**Other requirements**

Does the PI have a COI form on file?  Yes  No

Will the project involve persons, samples, data, or equipment sent to or received from outside the US?  Yes  No

If yes, contact Export Control (export@unmc.edu)

Will all or any part of this award be administered by another institution or company with separate regulatory approval?  Yes  No

If so, What institution/entity? \_\_\_\_\_

Does this project include the purchase of new equipment or software?  Yes  No

If yes, contact Facilities for equipment placement authorization and Information Security for a "Third Party Risk Assessment"

**Principal Investigator assurance statement**

- I agree that all information on the Application and Budget is true, complete, and accurate
- I agree that all required training has been completed
- I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant or contract is awarded as a result of the application

Signature of Principal Investigator \_\_\_\_\_

Signature of Mentor (if required) \_\_\_\_\_

Signature of Chair or Dean \_\_\_\_\_

Administrative use only:			
Date Regulatory approvals received		Total Budget Approved	



4. COMPUTER SERVICES (must justify relevance to the research activity, other than faculty support)		
5. SUBAWARDS		
6. OTHER		
TOTAL OTHER COSTS (1 THROUGH 6)		
H. TOTAL COSTS (A THROUGH G)		

**Budget Justification:**