

Notes:

- CV-related information, including honors and publications, is strictly limited to **no more than four pages**. References do not count toward the page limit.
- Funding support from the SRF is in the form of a grant.
- Pages of the grant application should be numbered consecutively.

TITLE OF PROJECT:

POSTDOCTORAL FELLOW:

Name (Last, first, middle initial): _____

Degree(s): _____

Position title: _____

Institution: _____

Department, service, laboratory, or equivalent: _____

Major subdivision: _____

Mailing address: _____

Telephone: _____ Fax: _____

E-mail: _____

Dates of proposed period of support (month/day/year): From _____ Through _____

Budget request for initial period: \$ _____

Budget request for proposed period of support: \$ _____

Note: Submit a budget in the format and level of detail found on the NIH grant application page, "Detailed Budget for Initial Budget Period – Direct Costs Only," including personnel (salary, fringe benefits), administrative, consultant, equipment, supplies, travel, patient care, animal costs and "other" expenses. The budget may go into an appendix. Budget pages will NOT count toward the 10-page limit. The SRF will NOT pay "indirects" or overhead costs but WILL pay project expenses for all SRF grants. The sole exception to this prohibition is that the SRF will pay indirect costs of up to 7.5% of the base award amount for multi-center (including > 10 distinct clinical centers), longitudinal patient studies (with an agreement for at least >3 years of follow-up) that are intended to enroll > 1,000 scleroderma patients.

SPONSORING PRINCIPAL INVESTIGATOR:

Name: _____

Title: _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

Describe commitment, availability of staff, research support and faculty for high-quality research training:

INSTITUTIONAL OFFICIAL TO BE NOTIFIED IF GRANT IS MADE:

Name: _____

Title: _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

IF GRANT IS AWARDED, SPECIFY PAYEE OF THE GRANT AND MAILING ADDRESS FOR RECEIPT OF FUNDS:

Check if same as institutional official above

Name: _____

Title: _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

DESCRIPTION

State the broad, long-term objectives and specific aims of the project. Describe succinctly the research design and methods for achieving these goals. Limit abstract to one page.

[Empty box for project description]

PROJECT INVOLVES HUMANS OR HUMAN MATERIAL: Yes No

PERFORMANCE SITE(S):

| Organization | City | State |
|---------------------|-------------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

OTHER SIGNIFICANT CONTRIBUTORS

Starting with principal investigator, list all other key personnel in alphabetical order, including collaborators or consultants. Put biographies of contributors and letters of collaboration in an appendix.

| Last Name, First Name | Organization | Role on project |
|------------------------------|---------------------|------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

BIOGRAPHICAL SKETCH OF POSTDOCTORAL FELLOW

NIH format (NIH form PHS 398) is acceptable and can be inserted in the grant application.

| Name | Position/Title |
|-------------|-----------------------|
| _____ | _____ |
| _____ | _____ |

EDUCATION/TRAINING

| Institution & Location | Degree | Year(s) | Field of Study |
|-----------------------------------|---------------|----------------|-----------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

POSITION AND HONORS

List in chronological order previous positions, concluding with your present location. List other experience and professional memberships. List any honors:

SELECTED PEER-REVIEWED PUBLICATIONS (IN CHRONOLOGICAL ORDER)

Do not include publications submitted or in preparation.

RESEARCH SUPPORT

List ongoing or completed (during the last three years) research projects. Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and your role (e.g., PI, Co-Investigator, Consultant) in the project.

RESEARCH PROPOSAL

Describe your proposal in sufficient detail for adequate evaluation by the SRF Scientific Advisory Board. Include items 1-5 below, and **do not exceed ten pages** for items 1-4, including figures and tables. Font size can be no smaller than 10 pt. (12 pt. if Times or Times New Roman is used). Proposal must include:

1. **Specific aims.** What do you intend to accomplish? What hypothesis is to be tested?
2. **Background and significance.** Why is the research important? Specifically identify the possible contributions your investigation may make to existing knowledge in the field of scleroderma research.
3. **Preliminary studies.** What has already been done in this area of study?
4. **Research design and methods.** Describe in detail the experimental design, the process to be used, and manner in which the data will be analyzed. Do not include details of established laboratory procedures.
5. **Literature cited.** Only cite references pertinent to the proposal.

CONCURRENT SUBMISSION OF RESEARCH PROPOSAL

List other non-governmental organizations where you have submitted or intend to submit a similar application:

I have not submitted nor do I intend to submit a similar application to any other non-governmental organization.

TO SUBMIT APPLICATION

1. Complete and sign the Postdoctoral Fellowship Grant Application form.
2. When you are ready to submit, contact grants@srfcure.org to request a Dropbox link where you will need to upload your signed application form, required research proposal, relevant appendix material, and three letters of recommendation.
3. Please allow up to 24 hours to receive the Dropbox link
4. All submission materials must be received no later than **January 10, 2021**.

For questions, email: grants@srfcure.org

After reviewing your application form and research proposal, the Scleroderma Research Foundation may request more details, if needed, to make an accurate judgment of the merits of the application.

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 criminal, civil, or administrative penalties. I agree to accept responsibility for the scientific conduct of the project, to provide the required progress reports if a grant is awarded as a result of this application and to attend the SRF annual Scientific Workshop to present my research.

Signature of Postdoctoral Fellow: _____ Date: _____

I certify that the statements herein are true, complete, and accurate to the best of my knowledge and accept the obligation to comply with the grantor's terms and conditions if a grant is awarded as a result of this application. I have attached a letter detailing my commitment to supporting this project.

Signature of Sponsoring Investigator: _____ Date: _____