

**SPORE in Myeloid Malignancies
Developmental Research Project (DRP)
2020 Application Instructions**

A. Deadlines

Application due: May 1, 2020 (by 5:00pm)
Earliest possible start: Wednesday, August 1, 2020

B. Purpose

The objective of the DRP is to identify and fund new ideas and projects for the SPORE in Myeloid Malignancies. The research plan and career goals of the individual may include the disciplines of basic biology, translational science, clinical science, population studies, outcomes, or social science but must have a plan for translation into humans, since the purpose of this program is to promote translational research in Myeloid Malignancies. Applications will be judged on their merit and/or their potential contribution to the overall status of the DF/HCC SPORE in Myeloid Malignancies. DRP projects are expected to be completed within the one year funding period.

C. Eligibility

Applicants must be on the faculty at Harvard Medical School or the Harvard T.H. Chan School of Public Health at the level of Instructor or higher, and with an independent laboratory. A track record of interest and productivity in hematologic malignancy research is strongly desired.

D. Amount

We anticipate awarding two awards of up to \$100,000 in annual direct costs. It is expected that the grantee will completely utilize the full amount by end of the funding period. All unspent funds at the end of the grant period will be returned.

E. Submission Guidelines

The completed application must be received by the deadline: **5:00 pm on May 1, 2020**. Late or incomplete applications will not be accepted. Combine all sections noted below into one PDF document and submit by email to Dr. Dora Levin JD_Levin@DFCI.HARVARD.EDU. Required application templates are attached to the end of this document.

All applications, including repeat applicants, must include the following:

- 1) **Face Page**
- 2) **Budget & Justification:** (PHS 398 format) Developmental Research projects will be up to \$100,000 direct cost for 1 year. The money can be used toward the awardees' salary, research supplies, and/or salaries of research assistants or technicians.
- 3) **NIH Biosketch:** Please use NIH guidelines; biosketches are required for all key personnel. Must include PMCID numbers on publications.
- 4) **NIH Other Support:** Please use NIH guidelines.
- 5) **Research Plan** (5-page maximum; All tables and figures are included in the 5-page limit.) Provide citations in *Blood* format. *The following headings should be used:*
 - a. *Specific Aims:* State concisely the hypothesis to be tested and the specific aim(s) that will be achieved during the grant period. Completion of the aims should be feasible during the one-year period of the grant.
 - b. *Significance to Myeloid Malignancy Research:* State the relevance of the proposed project to planning, conducting, and facilitating the discovery and development of anti-myeloid malignancy interventions and novel therapeutics.
 - c. *Background and Preliminary Investigations:* Discuss the pertinent research findings that have been described in the scientific literature and how this proposal will add to these results. Also, discuss any preliminary data you have that is relevant to this proposal.
 - d. *Experimental Design and Methods:* Concisely present the experimental design and the methods to be used to accomplish the specific aims. Also, indicate how the results will be interpreted and how they will lead to future investigations. Well-known methods and standard procedures may be described very briefly or referenced, but novel experimental approaches should be outlined in detail.
 - e. *Potential for Progression to Full Scale Translational Studies:* Discuss future plans to move this pilot project into a larger and explicitly translational or clinical research study.
- 6) **Appendix**
 - a. References
 - b. Copies of IRB and IACUC approvals, if applicable
 - c. If the project requires a sponsor, consultant or collaborator, this individual should write a letter of support for the application, including an explanation of how any overlap in effort will be reconciled if the project is funded.

Expenditures Allowed:

- Salary and fringe benefits up to a maximum of 50% effort per year for the PI
- Research materials, laboratory supplies, salary/fringe support for technicians, fees for core services
- Tuition reimbursement for coursework taken at DF/HCC institutions
- Travel to one national meeting per year

Expenditures NOT Allowed:

- Secretarial/administrative personnel salary support
- Office equipment and supplies
- Major Equipment
- Computer/equipment maintenance fees
- Indirect institutional costs

F. Terms of the Award

- Up to one hundred thousand (100,000) dollars will be provided in the funding period (August 1, 2020 through July 31, 2021). It is expected that the grantee will completely utilize the full amount by end of the funding period. All unspent funds at the end of the grant period will be returned.
- IRB & IACUC approvals are not required at the time of submission. However, all awards must have appropriate institutional regulatory approvals before funds will be allocated.
- An interim progress report is required by April 1, 2021. DRP awardees will present their findings once per year at a SPORE steering committee meeting.
- Recipients are expected to acknowledge the SPORE in Myeloid Malignancies (P50CA206963) in any publications/presentations that result from the funded work and must be submitted by the investigator to PubMed Central.

G. Review Process

All applications will be reviewed by members of the DRP Review Committee with the statistical review conducted by personnel in the Biostatistics Core (if needed) and scored for merit according to the following criteria:

- Candidate
 - Quality of the candidate's academic and clinical record.
 - Commitment and potential to develop as an independent and productive translational researcher focused on myeloid malignancy.
- Research Plan
 - Scientific and technical merit of the research question
 - Design and methodology judged in the context of the candidate's previous training and experience
- SPORE Relevance
 - Likelihood that the proposed project will lead to subsequent funding
 - Use of SPORE shared resources

If you have questions, please contact Dr. Dora Levin JD_Levin@DFCI.HARVARD.EDU.

SPORE in Myeloid Malignancies Developmental Research Project (DRP)
2020 Request for Applications (RFA)

Title of Project (no more than 81 characters):			
Project Start Date:		Project End Date:	
Principal Investigator(PI)			
Name: (Last, First, Middle)		Degree(s):	
Title:		Mailing Address:	
Applicant Organization:			
Department:	Division:	E-mail Address:	Phone Number:
Grant Administrator Contact Name:	Grant Administrator Phone Number:	Grant Administrator E-mail Address:	
HUMAN SUBJECTS RESEARCH		IRB APPROVAL	PENDING
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Clinical Trial		DATE ANTICIPATED	
<input type="checkbox"/> No <input type="checkbox"/> Yes			
VERTEBRATE ANIMALS <input type="checkbox"/> No <input type="checkbox"/> Yes		IACUC APPROVAL <input type="checkbox"/> No <input type="checkbox"/> Yes	PENDING <input type="checkbox"/> No <input type="checkbox"/> Yes
		Approval Date:	Date Anticipated:

Eligibility Requirements:

HMS faculty as of August 1st of the funding year (Instructor or above with an independent laboratory)

List Co-Investigators/Collaborators expected to participate in the project.

Name	Prime Institution	Department/Division

SIGNATURE OF PRINCIPAL INVESTIGATOR (electronic signature is acceptable)	DATE

Program Director/Principal Investigator (Last, First, Middle):

**DETAILED BUDGET FOR INITIAL BUDGET PERIOD
DIRECT COSTS ONLY**

FROM

THROUGH

List PERSONNEL (*Applicant organization only*)
Use Cal, Acad, to Enter Months Devoted to Project
Enter Dollar Amounts Requested (*omit cents*) for Salary Requested and Fringe Benefits

NAME	ROLE ON PROJECT	Cal. Mnths	Acad. Mnths	INST.BASE SALARY	SALARY REQUESTED	FRINGE BENEFITS	TOTAL
	PD/PI						
SUBTOTALS →							

CONSULTANT COSTS

SUPPLIES (*Itemize by category*)

TRAVEL

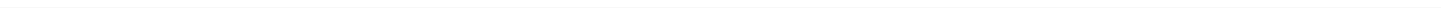
OTHER EXPENSES (*Itemize by category*)

TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD

\$

Program Director/Principal Investigator (Last, First, Middle):

BUDGET JUSTIFICATION



BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY

Program Director/Principal Investigator (Last, First, Middle):

OTHER SUPPORT (NIH format)



Program Director/Principal Investigator (Last, First, Middle):

RESEARCH PLAN (5 pages maximum)

