

COMMONWEALTH OF VIRGINIA

**Alzheimer's and Related Diseases Research Award Fund**

**Application Form for Proposal  
Deadline: March 12, 2020**

<b>PART I</b>	
<b>1. PRINCIPAL INVESTIGATOR</b>	
a. FULL NAME	b. DEGREE(S)
c. JOB TITLE	d. MAILING ADDRESS (street, city, state, zip code)
e. DEPARTMENT/SCHOOL	
f. INSTITUTION	
g. TELEPHONE	h. EMAIL
<b>2. CO-INVESTIGATOR(S) and PROJECT STAFF</b>	
a. CO-INVESTIGATORS FULL NAME(S), DEGREE(S), AND INSTITUTION	b. PROJECT STAFF NAMES
<b>3. TITLE OF PROPOSAL</b>	
<b>4. AMOUNT REQUESTED (not to exceed \$45,000)</b>	
\$	
<b>5. AUTHORIZED OFFICIAL</b>	
a. NAME (last, first)	b. MAILING ADDRESS (street, city, state, zip code)
c. POSITION	
d. TELEPHONE	
e. EMAIL	
<b>6. SIGNATURES (use blue ink if not using digital signature)</b>	
I certify that the statements herein are true and complete to the best of my knowledge, and accept the obligation to comply with the contractual terms and conditions of the Alzheimer's and Related Diseases Research Award Fund (ARDRAF) if a grant is awarded as the result of this application.	
a. PRINCIPAL INVESTIGATOR	DATE
b. AUTHORIZED OFFICIAL	DATE

## 7. OTHER SUPPORT

Note: Incomplete, inaccurate, or ambiguous information about Other Support could lead to significant delays in the review and funding of proposals. By signing and dating the cover page of this application, the Principal Investigator and Authorized Official certify that any changes in Other Support information after the application has been submitted will be reported immediately to the administrator of the ARDRAF.

a. For all key personnel participating directly in the project (i.e., the Principal investigator, Co-investigator(s), and other individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they request salaries or compensation), list all currently active support from grants or contracts and all applications or proposals pending review or award, whether related to this application or not. Include the status (active or pending), title, amount, funding period, funding sources and role (including % effort) of the person involved. *Clearly, indicate whether there is any scientific or budgetary overlap with the currently proposed project. (Use continuation pages, if needed). Be sure to attach a copy of the specific aims for active or pending awards, grants or contracts as an appendix to this application.*

b. Is the proposed ARDRAF project supported in part or in full, or has another grant program, research contract, or any other source of funds supported it previously?

YES

NO

If "YES," describe any scientific or budgetary overlap with the currently proposed project (Use continuation pages, if needed)

8. INSTITUTIONAL REVIEW BOARD STATUS	
a. Are human subjects involved in the proposed research? <i>If "YES," include a copy of the research synopsis/narrative description/grant application summary form submitted to the Institutional Review Board (IRB) as an appendix to your proposal.</i>	YES
	NO
b. Is evidence of IRB approval to <i>begin enrolling subjects in the proposed project</i> attached?	YES
	NO
c. <i>If approval is pending</i> , please indicate the date when a decision will be made and provide the IRB number assigned to the pending application.	EXPECTED APPROVAL DATE
	IRB NUMBER
d. <i>If the pending IRB protocol is being approved under another grant</i> , please provide the protocol number, the grant number, and title.	PROTOCOL NUMBER
	GRANT NUMBER
TITLE	
<p><b>Note:</b> It is the responsibility of the applicant to forward evidence of IRB approval to <i>begin enrolling subjects in the proposed project</i> no later than April 22, 2020. Certification of IRB grant review or preliminary IRB approval is not sufficient. The Awards Committee may choose <b>not</b> to consider applicants that lack evidence of IRB authorization to <i>begin enrolling subjects</i>.</p>	
9. INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE	
a. Are laboratory animals involved in the proposed research? <i>If "YES," include a copy of the research synopsis/abstract of the experimental purpose/summary of the study aims submitted to the Institutional Animal Care and Use Committee (IACUC) as an appendix to your proposal.</i>	YES
	NO
b. Is evidence of IACUC approval also attached?	YES
	NO
c. <i>If approval is pending</i> , please indicate the date when a decision will be made and provide the IACUC number assigned to the pending application.	EXPECTED APPROVAL DATE
	IACUC NUMBER
d. <i>If the pending IACUC protocol is being approved under another grant</i> , please provide the protocol number, the grant number, and title.	PROTOCOL NUMBER
	GRANT NUMBER
TITLE	
<p><b>Note:</b> It is the responsibility of the applicant to forward evidence of approval no later than April 22, 2020. The Awards Committee may choose <b>not</b> to consider applications that lack evidence of IACUC authorization.</p>	

10. INSTITUTIONAL BIOSAFETY COMMITTEE	
a. Does the proposed research involve the use of biohazardous substances (e.g., recombinant DNA or human materials, i.e., blood, cell lines)? <i>If "YES," include a copy of the biosafety registration document/memorandum of understanding submitted to the Institutional Biosafety Committee for approval as an appendix.</i>	YES
	NO
b. Is evidence of IBC approval attached?	YES
	NO
c. <i>If approval is pending</i> , please indicate the date when a decision will be made and provide the IBC number assigned to the pending IBC application.	EXPECTED APPROVAL DATE
	IBC NUMBER
d. <i>If the pending IBC application is being approved under another grant</i> , provide the protocol number, the grant number, and the title.	PROTOCOL NUMBER
	GRANT NUMBER
TITLE	
<b>Note:</b> It is the responsibility of the applicant to forward evidence of approval no later than April 22, 2020. The Awards Committee may choose <b>not</b> to consider applications that lack evidence of IBC authorization.	
11. RESUBMISSIONS	
a. Is this a resubmission of a previous ARDRAF proposal?	YES
	NO
b. <i>If "YES,"</i> please summarize any changes you have made in this revised proposal. (Use continuation pages, if needed)	

**12.** If the Principal Investigator or Co-investigator(s) have been previously funded by the ARDRAF, please list year(s) and title of the project(s) below, and in the appendix attach any publications or abstracts for presentations that resulted from your previous award(s).

**13.** If the Principal Investigator or Co-investigator(s) have been previously funded by the ARDRAF, did the pilot data strengthen any grant applications that have been subsequently funded or lead to any related contracts supporting your work?

YES
NO

a. *If "YES,"* please list the funding source, project title, funding period, status (completed, active, or pending), and the exact dollar amount of the award or contract (*specify direct costs only*).

<b>PART II. BUDGET</b>				
<b>ITEMIZED</b>	<b>CONTRIBUTED RESOURCES<sup>1</sup></b>		<b>AMOUNT REQUESTED FROM ARDRAF</b>	
PERSONNEL <sup>2</sup> (Names, title(s), % of effort)	PERSONNEL		PERSONNEL	
	SUBTOTAL	\$	SUBTOTAL	\$
FRINGE (Identify organizational fringe rate)	FRINGE		FRINGE	
	SUBTOTAL	\$	SUBTOTAL	\$
SUPPLIES (Specify)	SUPPLIES		SUPPLIES	
	SUBTOTAL	\$	SUBTOTAL	\$
TRAVEL (Dissemination travel limited to \$1000)	TRAVEL		TRAVEL	
	SUBTOTAL	\$	SUBTOTAL	\$
EQUIPMENT (Limited to 10% of total award)	EQUIPMENT		EQUIPMENT	
	SUBTOTAL	\$	SUBTOTAL	\$
OTHER (Specify)	OTHER		OTHER	
	SUBTOTAL	\$	SUBTOTAL	\$
	<b>TOTAL CONTRIBUTED</b>		<b>TOTAL REQUESTED</b>	
	\$		\$	

<sup>1</sup> Include letter of commitment from source of in-kind contributions as an appendix to this application.

<sup>2</sup> Tuition reimbursement and graduate student stipends are not allowed. Students may be supported by the ARDRAF as hourly employees, however.

### **PART III. BUDGET JUSTIFICATION**

List percent of effort on the project along with the roles and responsibilities of key personnel participating directly in the project (i.e., the Principal investigator, Co-investigator(s), and other individuals who will contribute to the scientific development or execution of the project in a substantive, measurable way, whether or not they request salaries or compensation. Explain and justify requests for equipment, unusual supplies, travel reimbursement, and other expenses. (Use continuation pages, if needed)

### **PART IV. ABSTRACT**

Please provide a non-technical abstract of the proposed project (250 words or less).

## PART V. PROJECT DESCRIPTION

The project description is limited to **nine, single-spaced** (or 18 double-spaced), 8 ½" x 11", typewritten pages (does not include references, initial application pages, vitae, or appendix material). All application pages should be numbered consecutively. The type must be standard size (11 points or larger. Type density must be no more than 15 characters per inch including characters and spaces). All margins must be at least 1/2". **Applications not meeting these requirements will be administratively withdrawn from further consideration for funding.** The project description should generally follow the format below.

A. **Specific Aims** (1 page or less suggested)

List the research objectives/hypotheses and what the project is intended to accomplish.

B. **Research Strategy** (limited to 6 pages)

i. **Significance** (2 page or less suggested)

- Explain the importance of the problem or critical barrier to progress in the field that the proposed project addresses.
- Explain how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
- Describe how the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field will be changed if the proposed aims are achieved.

*Note: If you have been previously funded by the ARDRAF, clearly explain any relationship between the previous work and the present proposal.*

ii. **Innovations** (1 page or less suggested)

- Explain how the application challenges and seeks to shift current research or clinical practice.
- Describe any novel theoretical concepts, approaches or methodologies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation, or interventions.
- Explain any refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions.

iii. **Approach** (3 pages or less suggested)

- Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Include how the data will be collected, analyzed, and interpreted, and any resource sharing plans as appropriate.
- Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the aims.
- If the project is in the early stages of development, describe any strategy to establish feasibility and address the management of any high-risk aspects of the proposed work.

*Note: Thoroughly describe any new methodology and indicate its advantage over existing methodologies. Otherwise, laboratory studies should employ acceptable methods that are appropriately referenced, and other experimental studies should employ standardized assessment instruments with references and specifications as to validity and reliability. Copies of proposed assessment tools should be included as an appendix.*

C. **Physical Facilities** (1/2 page or less suggested)

State the adequacy and appropriateness of all laboratory, clinical, animal, computer, or office facilities to be used by the project.

D. **Schedule** (1 paragraph or chart suggested)

Provide a proposed timetable for completing project activities

E. **Appropriateness for Funding** (3/4 page or less suggested)

Explain why the proposed project is appropriate for funding by the ARDRAF.

*Note: Refer to the goals of the Award Fund as given on the first page of the ARDRAF Guidelines.*

F. **Next Steps** (1/2 page or less suggested )

Describe how the proposed project relates to the investigator's broader research program and plans for securing future funding to support the next steps.



## PART VI. LITERATURE CITATIONS

References in the text are shown by citing, in parentheses, either the authors' surnames and the year of the publication (if the reference list is alphabetized) or the number assigned to the citation in a sequential reference list. A complete list of references should be provided at the end of the project description. Most style guides include format specifications for citations and all formats are acceptable. If your organization does not already have a standard, you may want to consider a standard format used by the National Library of Medicine.

([https://www.nlm.nih.gov/bsd/uniform\\_requirements.html](https://www.nlm.nih.gov/bsd/uniform_requirements.html))

## PART VII. BIOSKETCHES

Attach copies of the biosketches for all personnel participating directly in the project (i.e., the Principal Investigator, Co-investigators, and other individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they request salaries or compensation). Biosketches should be *no longer than 2 pages* for each person, including selected publications.

## PART VIII. PEER REVIEWER

As a part of the review process described in the ARDRAF Guidelines, an independent reviewer, recommended by the applicant, reviews each proposal. Applicants shall seek to involve peers who can provide an objective review. In addition to the standard criteria that would constitute a financial conflict of interest or the appearance of a financial conflict of interest (see <https://grants.nih.gov/grants/peer/Post-Cert-Form.pdf>), peer reviewers **shall NOT**:

- Be affiliated with the home institution or agency of the Principal/Co-investigators or other key personnel;
- Be a co-investigator or collaborator of the Principal/Co-investigators or other key personnel on any active or pending grant-funded project or any grant applications in preparation; or
- Be a co-author on any publication or manuscript in preparation, Principal/Co-investigators or other key personnel within the last three years
- Have mentored or trained the Principal/Co-investigators or other key personnel within the last three years.

In the application's appendix, provide written consent from three individuals who are qualified to review your proposal along with written confirmation that they are free from the influence of a conflict of interest as defined in the bullet points above (emails will suffice). **If a peer review cannot be obtained because of the applicant's failure to secure prior consent and verification that a conflict of interest does not exist for any named peer reviewer, the application will be administratively withdrawn from consideration for funding.** Peer reviewers should be informed that we try to allow approximately one month for the completion of reviews and that the due date is generally no later than the middle of May. Please submit full contact information for the **three** individuals who have agreed to review your proposal and indicate why each would be an appropriate reviewer. One of the three will be selected by the ARDRAF Administrator to receive a copy of your proposal and the review form. Completed review forms will be returned to the Virginia Center on Aging for use by the Awards Committee and kept in confidence. Applicants who are not funded may request summarized feedback from anonymous reviewers and the Awards Committee after the award decisions have been made.

### 14. PEER REVIEWER 1

a. NAME and DEGREE(S)	e. MAILING ADDRESS (box number or mailing code, street, city, state, zip code)
b. TELEPHONE	
c. EMAIL	f. Why is this reviewer appropriate?
d. DEPARTMENT and INSTITUTION	

15. PEER REVIEWER 2	
a. NAME and DEGREE(S)	e. MAILING ADDRESS (box number or mailing code, street, city, state, zip code)
b. TELEPHONE	
c. EMAIL	f. Why is this reviewer appropriate?
d. DEPARTMENT and INSTITUTION	

16. PEER REVIEWER 3	
a. NAME and DEGREE(S)	e. MAILING ADDRESS (box number or mailing code, street, city, state, zip code)
b. TELEPHONE	
c. EMAIL	f. Why is this reviewer appropriate?
d. DEPARTMENT and INSTITUTION	

## PART IX. APPENDICES

Appendix materials should be kept to a minimum. Letters of commendation or general support should not be solicited. Be sure to include, *if applicable*:

- the specific aims for active, previous, or pending awards, grants, or contracts (Part I, 7a);
- IRB/IACUC/IBC applications and evidence of approval if the review has been completed (Part I, 8a/9a/10a);
- abstracts for presentations, publications, etc., which resulted from previous ARDRAF awards (Part I, 12);
- letters of commitment from source(s) of in-kind contributions (Part II);
- surveys, questionnaires, and other data collection instruments; clinical protocols (Part V, B3); and
- written consent of three peer reviewers (Part VIII).

*Note: Applicants may submit up to 3 of the following types of publications:*

- *Manuscripts and/or abstracts accepted for publication but not yet published.*
- *Manuscripts and/or abstracts published, but a free, online, publicly available journal link is not available.*
- *Patents directly relevant to the project.*

*(Do not include unpublished theses, or abstracts/manuscripts submitted (but not yet accepted) for publication.)*

**17. APPLICATION DEADLINE:** The *signed original (1-sided, no staples)* may be hand-delivered by the close of business on or before the due date OR sent by carriers who date stamp on or before the due date, with an additional electronic, emailed copy sent on or before **Thursday, March 12, 2020.**

Send to:	Constance L. Coogle, PhD, Administrator Alzheimer's and Related Diseases Research Award Fund Virginia Center on Aging Virginia Commonwealth University 900 E Leigh St., 7 <sup>th</sup> Floor, Rm. 7216 Richmond, VA 23219
For regular correspondence:	Box 980229 Richmond, VA 23298
Send electronic copy to:	ardraf@vcu.edu

## APPLICATION SUBMISSION CHECKLIST

The following elements are reminders of items that must be included in the submitted application. Applicants should complete and sign the checklist and include it *as the last page* of their application. **Incomplete applications or those that do not adhere to the specifications given in this Application Form and the ARDRAF “Guidelines for Submitting Research Proposals” will be administratively withdrawn from further consideration for funding.**

### PART I.

- 1-6. Cover Page – Signatures are required of Principal Investigator and Authorized Official
7. Other Support – Specific aims and other requested information for all active and pending support for Principal Investigator, Co-investigator(s), and project staff
- 7b. Statement of scientific and budgetary overlap with the proposed project
8. Human subjects IRB research synopsis, approval notification, expected date for pending decision, and grant/protocol numbers
9. IACUC research synopsis, approval notification, expected date for pending decision, and grant/protocol numbers
10. Biosafety approval granting authorization for your laboratory
11. Summary of changes for resubmission
12. List of publications/presentations related to previous ARDRAF-funded projects
13. Subsequent funding related to previous ARDRAF-funded projects

PART II. Budget (Letters of commitment from sources of in-kind contributions)

PART III. Budget Justification (% effort, roles, responsibilities for Principal Investigator, Co-investigator(s), and project staff)

PART IV. Non-technical Abstract

PART V. Project Description (adhering to the page limitation for items A-F)

PART VI. Literature Citations

PART VII. Biosketches (include 2-page maximum length vitae for Principal Investigator, Co-investigator(s), and other key personnel)

PART VIII. Peer Reviewers (provide written consent from three individuals who are qualified to review your proposal along with written confirmation that they are free of a conflict of interest as defined in Part VIII above)

PART IX. Appendices

Applications (single-sided original) may be hand-delivered by close of business on or before the due date OR may be sent by carriers who date stamp on or before the due date, with an electronic copy also e-mailed on or before **Thursday, March 12, 2020** to ardraf@vcu.edu.

Principal Investigator

Date

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