

Medical Grant Application Information

Thank you for your interest in The Children's Heart Foundation (CHF). The CHF supports clinical and basic science research in congenital heart disease, including, but not limited to the following areas: molecular genetics, biochemistry, pharmacology, devices and procedural research (cardiac catheterization and surgery), and long-term care of adults with congenital birth defects. The attached guidelines will provide you with a brief introduction to CHF policies; information needed to review your grant proposal and instructions for completing the application.

Funding Cycle and Limitations

CHF will issue one call for proposals in 2010. Deadline for applications is **June 4, 2010**. A final decision and the announcement of grants will be made in December 2010. CHF will acknowledge receipt of proposals within 30 days of the receipt by letter. Upon review, a letter will be sent by CHF regarding grant proposal status.

Beginning with new grants made in 2002, CHF funding will be limited to two years (consecutive or otherwise). No single project may receive more than \$100,000 in CHF funds during any calendar year.

The recipient of any grant from CHF must use the funds awarded for the specific purpose for which they were originally intended. CHF requires that a detailed accounting of all funds along with a follow-up progress report, be submitted no more than one year from the date of the award (see below). Any funds not used in the above manner specified must be returned to CHF. If funding for the same project is secured through another agency, funds must be returned to CHF upon receipt of funds from the other agency. Requests for CHF funding should be submitted prior to securing commercial investment or support.

General Information

English is the only language to be used. Please type the entire application on the enclosed application form. The format should be single-spaced with font size 10 – 12 point. Observe page limitations as outlined in the "Specific Instructions." Use standard black ink for all signatures, line drawings, diagrams or graphics, tables and charts. Computer-generated graphics or facsimiles may be submitted but these must be able to be photocopied. Do not use the backside of the grant pages.

The application form should include all items listed under "Specific Instructions." Once the application is complete, please submit in WORD format. Electronic copies of up to three of your most representative work should accompany the application. Applications must be submitted via cd/disc.

If any part of the application is incomplete, if any of the documents requested are not included, or if page limitations, font, or format are not observed, the application will not be reviewed.

SPECIFIC INSTRUCTIONS

Face Page

Title of project: Please observe the size limitation of the box and limit the title to a maximum of two lines.

Name of principal investigator: Please give full name of the PI responsible for the scientific conduct of the study.

Degree(s): List up to the three highest degrees earned by the PI.

Academic rank/title: Please list the current academic rank or title of the PI.

Address: Please list the address of the PI that is to be used for all correspondence, including the city, state, nation, and zip code.

Telephone, fax and/or email: Please supply the information that is to be used for all correspondence. This can be home or work numbers and addresses.

Human subjects: By checking the proper box, please indicate whether human subjects are to be used. If the answer is yes, please give the IRB approval date for the project.

Animal subjects: By checking the proper box, please indicate whether animal subjects are to be used in this project. If the answer is yes, please indicate the IACUC approval date.

Dates of proposed project: Please indicate the proposed start and finish date for this project.

Amount of funding requested: Please indicate the funding requested for the first year of the project and the total funding required to complete the project.

Name and address of administrative financial officer: Please list the administrative financial officer responsible for overseeing grant monies for the applicants institution. The original signature of this official is required.

Name and address of department chairman: Please list the Department Chairperson for the applicant. If the PI is the department chairperson, type "same as PI." Chairperson's original signature is required.

PI assurance: PI must sign the assurance "oath" for honest scientific conduct.

Table of Contents

Please fill out the table of contents as outlined on the page provided.

Research Plan

The research plan should be organized according to the following format: Specific Aims, Background and Significance, Preliminary Studies, Research Design and Methods.

(a) **Specific Aims:** List the broad and long-term objectives of the project. Describe concisely and realistically what the specific research described in the application is intended to accomplish and any hypotheses that are to be tested. One page is recommended.

(b) **Background and Significance:** Briefly sketch the background of the present proposal, critically evaluate the existing knowledge and specifically identify the gaps in the knowledge, which this project is intended to fill. State concisely the importance of the research described in the application by relating the specific aims to the broad long-term objectives. Relate the relevance of the research to the diagnostic and/or treatment of congenital heart disease. One to two pages are recommended.

(c) **Preliminary Studies:** For new applications, a report of the PI's preliminary studies related to the studies in this application are recommended. This should establish the experience and competence of the investigator to pursue the proposed project. For renewals, a project report should be submitted for this section (see below).

(d) **Research Design and Methods:** Describe the research design and the procedures to be used to accomplish the specific aims of the project. Include how the data will be collected, analyzed and interpreted. Describe any new methodology and their possible advantages over existing methodologies. Discuss the potential difficulties and limitations of the proposed procedures and alternative approaches to achieve the aims. Provide a tentative timetable for the investigation. Any procedures, situations, or materials that may be hazardous to personnel and precautions that will be taken should be discussed.

Include sufficient but concise information to facilitate an effective evaluation without having to review any previous application(s). Be specific and informative and avoid redundancies. **Reviewers often consider brevity and clarity in the presentation to be indicative of a focused approach to the research objective and the ability to achieve specific aims of the project.**

Although no specific page recommendation is made for this section, please be cognizant that **the maximum number of pages allowed for parts (a) through (d) is 10 pages**, including all tables and figures. Do not attach an appendix for tables and figures.

Human and Animal Subjects

Human Subjects: The regulations for the protection of the human subject provide a systematic means, based on established, internationally recognized ethical principles, to safeguard the rights and welfare of individuals who participate as subjects in research activities. The regulations require that applicant organizations establish and maintain appropriate policies and procedures for the protection of human subjects.

Briefly describe the proposed involvement of human subjects in the work to be conducted, including the characteristics of the population, the anticipated number of participants, the age range, health status and rationale for the use or exclusion of any specific subpopulation. Indicate if specimens will be taken from individuals, or if specimens exist, indicate if records or dates will be used. Describe plans for the recruitment of subjects and the consent procedure to be followed. Please indicate if recruitment bias is likely and what steps are to be taken to limit the bias. State if the Institutional Review Board (IRB) has approved the project or authorized a modification or waiver of consent procedure. Discuss why the risks to the subject in relation to potential benefits are reasonable and acceptable.

Animal Subjects: Provide a detailed description of the proposed use of the animals, identifying species, sex, origin, age range and numbers of animals to be used. Justify the use of the animals including the choice of species and numbers to be used. Provide information on the veterinary care of the animals and the facilities available. Describe the procedures to be used to ensure that discomfort, distress, pain and injury will be minimized. Describe the use of analgesia and anesthesia to be used and the method of euthanasia to be used.

Detailed Budget for the Project

Use the budget form enclosed to detail the costs of the project and the requested funding. Please note that only direct costs will be considered for funding. A list of the non-allowable costs is detailed below. If the project is to proceed through multiple years, please fill out a budget form for each year of anticipated funding, noting the year (i.e. 1,2,3...) in the upper left box.

Non-allowable costs: Outlined below is a list of non-allowable costs. This list is not exhaustive. If you have a question about an allowable cost, please consult the CHF office before submission.

Alteration or renovation of lab or office space

Audiovisual materials

Audit costs

Communications

Conference grant costs

Consultant services – may be allowable under certain circumstances; please consult CHF office

Entertainment costs

Fringe benefits

Fundraising

Indirect costs

Insurance

New construction

Principal Investigator or consultant salary

Publications – may be allowable if work to be published is supported by the CHF grant and if the charges are levied impartially on all papers published by the journal. The cost for reprints without covers is allowable; if the journal only provides reprints with covers, the additional costs may be allowable.

Travel expenses

Taxes

Tuition or trainee salary or costs

Technician salary is generally allowable if the justification is provided that the project could not be processed without this employee's help and expertise. The principal investigator must directly employ the technician; consultant technician salary will not be allowed.

Biographical Sketch

Please complete biographical sketch for principal investigator and collaborators, including education, training, honors and awards, and past and pending funding. Any overlap with present or future funding with the CHF grant proposal should be detailed. List up to 10 representative publications. The publications should reflect either the most recent publications or the publications that reflect the investigator's prior experience in the field.

IRS 501 (c) (3) Form

Please have the financial officer at your institution submit a copy of the 501 (c) (3) form or letter outlining the tax-exempt status of the institution. Only one copy needs to be submitted with the original application.

Lay Summary

Please provide a one-page summary written in non-technical, lay terms. This should outline the aims of the project, give a brief statement of methods to be used, what new information is to be gained by the research, the significance of the research and how it related to the diagnosis or treatment of congenital heart disease.

Do not attach an appendix to the grant application. Any materials contained in an appendix will not be considered as part of the application.

Funding Follow-up Request

CHF requires a 1-2 page progress report and detailed accounting of all monies used at the end of each funding year which summarizes the research accomplished based on stated specific aims. Abstracts or publications resulting from this funding should be attached. Please indicate the support of CHF in publications by including a statement such as "Supported (in part) by a grant from The Children's Heart Foundation."

FOR ADDITIONAL INFORMATION

If you have any questions regarding your application, please call or fax William Foley, Executive Director at the following address:

The Children's Heart Foundation
P.O. Box 244
Lincolnshire, IL 60069-0244

Tel.: 847-634-6474
Fax: 847-634-4988

If sending copies by U.S. mail, please send to:
The Children's Heart Foundation
P.O. Box 244
Lincolnshire, IL 60069-0244

If using FedEx, UPS, etc., please send to:
The Children's Heart Foundation
620 Margate Drive
Lincolnshire, IL 60069-0244

The Children's Heart Foundation Medical Grant Application P.O. Box 244 Lincolnshire, IL 60069-00244 Tel.: 847-634-6474 Fax: 847-634-4988		CHF use only Grant No.	
Title of Project			
Name of Principal Investigator		Degree(s)	
Academic Rank/Title			
Address			
Telephone	Fax	Email	
Human Subjects <input type="checkbox"/> Yes <input type="checkbox"/> No	Animal Subjects <input type="checkbox"/> Yes <input type="checkbox"/> No		
IRB approval date:	IACUC approval date:		
Dates of proposed project	Amount of funding requested		
	Year 1:	Total:	
Name and address of Administrative Financial Officer		Signature and date	
Name and address of Department Chairperson		Signature and date	
PI assurance: As PI on this project, I accept responsibility for the scientific and financial conduct of this project and will provide a progress report after each year of funding. Falsification of any data or report is a criminal offense.		PI signature and date	

Face Page

The Children's Heart Foundation Medical Grant Application Form

Table of Contents	Page(s)
1. Research Plan	_____
a. Specific Aims	_____
b. Background and Significance	_____
c. Preliminary Studies	_____
d. Research Design and Methods	_____
2. Human and Animal Subjects	_____
3. Detailed Budget	_____
4. Biographical Sketch of PI	_____
5. Biographical Sketches of Collaborators	_____
6. IRS form	_____
7 Lay Summary	_____
8. Reprints of up to three representative works in this area	

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

Detailed Budget For Project (Year _____) Direct Costs Only					Budget From	Budget To
Personnel						
Name	Role on Project	FT or PT	% Effort	Base Salary	Salary Requested	Totals
	PI			XXXXX	XXXXXX	XXXXX
Subtotals	XXXXXX	XXXXXX	XXXXX			
Equipment (Itemize)						
Supplies						
Patient Care Costs	Inpatient					
	Outpatient					
Other Expenses						
SUBTOTAL DIRECT COSTS						
TOTAL DIRECT COSTS						\$

Biographical Sketch (use separate page for each investigator)

Name (Last, First, Middle)

Institution and Location	Degree	Year	Field of Study
Undergraduate			
Graduate			
Post-graduate			
Other training			

Honors and Awards

--	--	--

Past and pending funding (may use additional pages)	Amount funded	Years funded
--	---------------	--------------

--	--	--

