Pilot Project Grant

- **Overview**
The MS CEPR COBRE will provide funding for up to 4 junior investigators per year for pilot projects in perinatal research that encompasses the study of disease states that may occur during gestation and early post-natal development and that result in long term consequences in the mother and offspring across their lifespan. Funding will be $35-40,000 per year.

- **Objectives**
The main purpose of these pilot grants is to assist new investigators in generating sufficient data to be competitive for extramural funding. Therefore, a major criterion for review of these applications will be competitiveness for extramural funding if pilot grant funding is awarded.

- **Eligibility**
Eligible applicants cannot currently be principal investigators or previously have been principal investigators on a P01 or R01 type NIH grant or an equivalent National Science Foundation Grant. A focus based on adverse pregnancy, congenital disease and developmental is required.

- **Submission of Applications**
Application forms and instructions will be available on the MS CEPR website. MS CEPR Pilot Grants are made for a one-year period.

An electronic copy of the proposal should be submitted in Word format to Pamela Keys at pkeys@umc.edu. The transmittal form should be signed by the principal investigator, department chair and/or the appropriate dean from schools other than the School of Medicine.

Please note the following administrative requirements: Page limitations indicated throughout the application will be strictly enforced. Applications should reflect NIH font sizes only, minimum size 11.0 Arial, Helvetica, Palatino or Georgia. Please attach a copy of the entire summary statement or original review comments from other funding sources for proposed projects that have been reviewed previously. Also include a brief description of the changes you have made to your submission based on prior reviewer comments or suggestions (1 page maximum). Biosketches are required from all investigators and letters of support are required from all consultants.

For an application to be complete, the following must be included in the submission:

1. UMMC transmittal form
   a. PDF transmittal instructions
2. PHS 398 – Face Page
3. PHS 398 Project Summary – Page 2
4. Research Plan on a PHS 398 continuation page
5. PHS 398 – Detailed Budget – Page 4
6. Budget Justification on a PHS continuation page
   a. Budget justification template
7. NIH biosketch form
8. Institutional IRB approval and human subjects protection section, human subjects education certification, and Inclusion Enrollment Report, if applicable
9. Institutional IACUC approval, vertebrate animal 4 points, if applicable
   a. Instructions
10. Institutional approval from Office of Radiation Safety if use of radiation or radioisotopes

- **Method of Review and Funding**
  Members of the review committee will independently rate the applications based on scientific merit and taking into consideration the applicant’s previous research experience, feasibility of the proposed study, scientific and/or medical importance of the proposed work, and potential for securing extramural funding of the proposed research. The Chair of this committee will assign Primary and Secondary reviewers for submitted applications. The NIH scoring format will be used (scoring 1-9). The reviewer will provide recommendations and comments concerning experimental design, methods, data evaluation, budget, and others. The Chairman will compile this information in order to arrive at an overall rating. At a general meeting of the selection committee, final recommendations and comments will be formulated and forwarded to COBRE Director and reviewed by the Executive Committee and External Advisory Committee. Awards are usually made to successful applicants within a few months of the application deadline.

- **Restrictions on the Use of Funds**
  No awards will be made for faculty salary, travel expenses, or consultant expenses.

- **Monitoring of Expenditures**
  The MS CEPR Administrative Core will monitor the expenditure of funds in various budget categories. Any changes in originally funded budget categories that are restricted will require prior approval by the Pilot Projects Program Director and External Advisory Committee.

  *The committee will have the authority to revoke any award if sufficient progress cannot be demonstrated or if overlap funding for the project is received from other sources. The investigator is obligated to report overlap funding for the project in a timely manner and must relinquish Pilot Grant funds at the time other funding is obtained.*

  Extension of time or funds of the original award will generally not be considered. Requests for such extensions under the most extenuating circumstances should be anticipated and submitted at least three months prior to the termination date of the award.
• **Mandatory Reports**
A final report of research findings and plans for submission of an application for extramural funding will be required 30 days following the end of the funding period. This report should include the awardee's progress, publications, pending requests, and awards received from other sources based on work supported by the MS CEPR Pilot Grant. In addition, a follow-up report will be requested approximately 1-2 years after the initiation of the award. These reports will be important in considering any subsequent request by an award recipient for further support. Instructions for completing these reports will be sent to each grant recipient. Any invention resulting from a Pilot Grant must be reported to the MS CEPR Director, who will forward this information to the External Advisory Panel and NIGMS.

• **Publications**
All publications and abstracts resulting from research supported either directly or indirectly by the MS CEPR Pilot Grants Program should acknowledge the support with the following statement:

“Research reported in this publication was supported by the National Institute of General Medical Sciences of the National Institutes of Health under Award Number P20GM121334. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.”