Application for Support
Research and Development Committee
University of Virginia School of Medicine

1. **Applicant's Name:**   **Date:**

   Applicant's Title: **Phone:**

   Department: **Division:**

   Address and Box Number:

2. **Title of Project:**

3. **Amount Requested:**

4. **Career Level (Chose One):**   **New Investigator**   **Mid-Career**   **Established**

                                                        1-5 years   5-10 years   10+ years

5. **List all current support including local funds, start-up funds, and external funds. Include the title of project, source of funds, amount of funding, and effective dates.**

6. **List any previous support from the Research and Development Committee with dates and amounts.**

7. Plans for future research support.

      a. List all applications that are pending funding.   Provide title, source, total direct costs, date of submission and proposed starting date for each proposal.

      b. List all planned applications for funding. Provide title, source, total direct costs, dates of submission and proposed starting date for each proposal.

8. If human subjects are involved in any way, including the use of blood, other fluids, specimens or tissues the Institutional Review Board (IRB-HSR) must approve the project prior to funding.

Will human subjects be involved in the research?
If yes attach a copy of the IRB approval.

9. If animals are involved in this project an approved protocol must be obtained from the Institutional Animal Care and Use Committee (IACUC).

Will animals be involved in this research?
If yes, attach a copy of the IACUC approval.

Proposal Checklist:

Form pages 1-3

Lay summary (Page 4)

Narrative (Pages 5-7)

References

NIH Budget Page and Justification

NIH Biosketch

IRB approval (if required)

IACUC approval (if required)

Signatures of Investigator and Departmental Chair

Signature of Applicant   Signature of Department Chair