**APPLICANT**

FIRST NAME\*:       LAST NAME\*:

DOCTORAL DEGREE(S)

& DATE(S) RECEIVED\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

E-MAIL\*:

TELEPHONE\*:

INSTITUTION\*:

DEPARTMENT\*:

STREET ADDRESS 1\*:

STREET ADDRESS 2\*:

CITY\*:

ZIP/POSTAL CODE\*:

Standard NIH Biosketch\*: ***attach file to your email***

**GRANT MANAGING ORGANIZATION / FINANCIAL OFFICER
(IF DIFFERENT FROM ABOVE)**

***IF NOT APPLICABLE, PLEASE SKIP TO NEXT STEP***

FIRST NAME\*:       LAST NAME\*:

INSTITUTION\*:

STREET ADDRESS 1\*:

STREET ADDRESS 2\*:

CITY\*:

ZIP/POSTAL CODE\*:

E-MAIL\*:

TELEPHONE\*:

**APPLICANT QUESTIONS**

NON-CONFIDENTIAL LAY SUMMARY\* (250-word summary of proposed research in lay language)

WHAT ARE THE IMPLICATIONS OF YOUR RESEARCH PROPOSAL IN THE MICROBIOME FIELD?\* (250-word limit)

DESCRIBE YOUR LONG-TERM CAREER AND RESEARCH GOALS\* (250-word limit)

**PROJECT DESCRIPTION**

DETAILED RESEARCH PROPOSAL\*: Please provide a detailed research proposal that includes the following: current state of knowledge related to proposed work, relevant work done by Principal Investigator, a clear and concise outline of research proposal, rationale for choice of methods and approaches, and the objectives and research plan clearly described. Excluding references and appendices that contain relevant data presented in charts, figures, diagrams, etc, this proposal **may not exceed 3 pages** (single-sided, single-spaced, ¾ margins on all sides, in 10 point Arial font size). PLEASE NOTE THAT PAGES IN EXCESS OF THE MAXIMUM WILL BE REMOVED FROM THE APPLICATION. The reference list and appendices of data are excluded from the 3-page limit, but applicants are asked to exercise discretion and limit data to that most relevant to the proposal.

TITLE\*:

ACRONYM:

GENERAL CONTEXT OF THE PROJECT\* (current state of knowledge, relevant work done by PI, etc):

OBJECTIVES\*:

RESEARCH PLAN/METHODOLOGY\*:

EXPECTED RESULTS\*:

ANY NECESSARY ADMINISTRATIVE AUTHORIZATION: attach file to your email

**BIBLIOGRAPHY**

Bibliography/references\* (Arial 10)

**MAIN INVESTIGATOR TEAM:**

**PERSON 1**

FIRST NAME:

LAST NAME:

TITLE:

INSTITUTION:

MAIN DISCIPLINE:

E-MAIL:

INDICATE: [ ] CO-INVESTIGATOR [ ] COLLABORATOR

**PERSON 2**

FIRST NAME:

LAST NAME:

TITLE:

INSTITUTION:

MAIN DISCIPLINE:

E-MAIL:

INDICATE: [ ] CO-INVESTIGATOR [ ] COLLABORATOR

**PERSON 3**

FIRST NAME:

LAST NAME:

TITLE:

INSTITUTION:

MAIN DISCIPLINE:

E-MAIL:

INDICATE: [ ] CO-INVESTIGATOR [ ] COLLABORATOR

**PERSON 4**

FIRST NAME:

LAST NAME:

TITLE:

INSTITUTION:

MAIN DISCIPLINE:

E-MAIL:

INDICATE: [ ] CO-INVESTIGATOR [ ] COLLABORATOR

**BUDGET**

Please indicate the budget for the grant money\*, below is a suggested template (1 page, Arial 10)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Number | % of Time | Amount |
| A. Equipment |       |       |       |
| B. Personnel 1. Technicians |       |       |       |
|  2. Other personnel (specify) |       |       |       |
|  3. Fringe benefits |       |       |       |
| C. Materials and Supplies 1. Animals |       |       |       |
|  2. Expendables |       |       |       |
|  3. Services |       |       |       |
|  4. Other (specify) |       |       |       |
| D. Travel |       |       |       |
| TOTAL |       |       |       |

**SCHEDULE**

Proposed schedule\* (Include milestones, no more than 1 page, Arial 10)