

ENDOCRINE FELLOWS FOUNDATION

APPLICATION FOR THE EFF ENDOCRINE RESEARCH GRANT CYCLE 2, 2010



EFF Headquarters
1310 19th Street, NW
Washington, DC 20036
Toll Free: (877) 877-6515
Phone: (860) 586-7574 x205
Fax: (202) 223-1762
Website: www.endocrinefellows.org
E-mail: [info @endocrinefellows.org](mailto:info@endocrinefellows.org)
On-Line Application: <http://www.endocrinefellows.org/grants/>

Applications are due on or before September 10, 2010

ENDOCRINE FELLOWS FOUNDATION

APPLICATION FOR THE EFF ENDOCRINE RESEARCH GRANT

Eligibility

The applicant must hold a M.D. and have completed residency training. Further, the applicant must be in the first or second Fellowship year with at least **ONE (1)** full year remaining (2012 completion date). M.D.-Ph.D. applicants should have no more than two years post- doctorate experience.

The applicant must be sponsored by a full-time faculty member of a North American university medical school or research institution, and both the applicant and the sponsor must be recommended by the chairperson of the department in which the proposed research is to be undertaken.

The applicant's institution, the sponsor, and the applicant will be jointly responsible for the accuracy and validity of the information contained in the application.

Past recipients of an Endocrine Fellows Foundation Grant Award are not eligible.

A Complete Application Consists of:

- ◆ An Endocrine Fellows Foundation application/checklist form, including all required signatures on the institution sign-off sheet.
- ◆ The applicant's research proposal (**not to exceed 4 pages**, not including references). The proposal should be formatted with the following headings: Background, Hypothesis, Specific Aims to Test Hypothesis, Research Plans, Methods of Data Analysis, and Significance.
- ◆ Graphic material, if applicable.
- ◆ Proposed budget.
- ◆ For projects that are already fully funded, justification for further funding must be provided and be directly linked to the applicant's research.
- ◆ The applicant's specific role in project must be indicated.
- ◆ The curriculum vitae of the applicant. This should include name, personal data, education and training (beginning at the college level), experience in research (if any), training or research faculty under whom the applicant has served, and a bibliography.
- ◆ A statement from the applicant's mentor indicating how the project will contribute to the applicant's overall training in endocrinology.
- ◆ Human Research Committee Approval.*
- ◆ Animal Research Committee Approval.*
- ◆ Committee on Biohazards Approval.*

Submit Your Application: Applications must be submitted on-line at <http://www.endocrinefellows.org/grants/> no later than Friday, September 10, 2010.

***Must be returned, filled out if applicable and marked N/A if not.**

Awards

The Endocrine Fellows Foundation will award up to 10 research grants during each calendar year. Each grant will be a one-time award in the amount up to \$7,500.

The Endocrine Fellows Foundation will not fund indirect research costs (i.e., computers, software, equipment, faculty support, salaries, etc.) or tuition support for degree enhancement.

Grant recipients will be required to make regular progress reports to the Board of Directors of the Endocrine Fellows Foundation. The first such report will be due six months from the starting date of the research project, and the final report due at the end of twelve months. ***ANY changes to the proposed research must be approved by the Endocrine Fellows Foundation Board of Directors.***

Administration

Endocrine Fellows Foundation research grants will be awarded to the institution on behalf of the fellow. The institution will then administer the funds.

The Endocrine Fellows Foundation will supply critique comments if the research proposal is not accepted. Applicants are welcome, if not funded the first time, to resubmit their grant for possible funding in the next cycle.

Publications

Publications, including abstracts of presentations at scientific meetings, resulting from a project supported by an Endocrine Fellows Foundation research grant must carry the following acknowledgment: "Funding for this project was received from the Endocrine Fellows Foundation."

Special Conditions

Endocrine Fellows Foundation research grant recipients must agree to present a poster describing the results of their research at a future designated Endocrine Fellows Foundation Event. If an appearance at a Poster Presentation is requested, the travel stipend will be limited to a maximum of \$650 (\$400 towards travel and \$250 towards hotel). This is in addition to your \$7,500 grant.

All application materials submitted will be kept strictly confidential.

Applications must be submitted on-line at

<http://www.endocrinefellows.org/grants/>

on or before September 10, 2010

**Notification letters will be sent
the week of October 25, 2010**

APPLICATION AND CHECKLIST FORM ***EFF Endocrine Research Grant***

APPLICANT INFORMATION

When you start your on-line application process at <http://www.endocrinefellows.org/grants/>, you will need to login or register. If you have not participated in the grant application process before, you will need to register first to obtain a username and password.

The on-line application form will ask you to provide us with your name, email address, institution name, your titles (M.D., Ph.D., D.O., etc.), your mailing address and phone numbers. Please type these out in full as this is the information we use to contact you. Incomplete information that delays our being able to reach you may disqualify your application. You will also be asked to provide your program director's name and information about your fellowship dates.

APPLICATION MATERIALS CHECKLIST

(All requested information MUST be provided. Applications with missing information will not be reviewed.)

- ◆ Institution Sign-Off Sheet
- ◆ Research Proposal (background, hypothesis, specific aims, research plans, methods of data analysis, significance)
- ◆ Graphic Material (if applicable)
- ◆ Budget
- ◆ Applicant's Role
- ◆ Curriculum Vitae
- ◆ Statement from Mentor
- ◆ Human Research Committee Approval
- ◆ Animal Research Committee Approval
- ◆ Committee on Biohazards Approval

For more information, contact
Anne L. Mercer
Executive Director
Endocrine Fellows Foundation
1310 19th Street, NW
Washington, DC 20036
Toll Free Number (877) 877-6515
Email: info@endocrinefellows.org

INSTITUTION SIGN-OFF SHEET

EFF Endocrine Research Grant

SPONSOR/MENTOR

Name: _____

Department: _____

Address: _____

Telephone: _____

Signature: _____

DEPARTMENT CHAIRPERSON

Department chairperson: _____

Department: _____

Address: _____

Telephone: _____

Signature: _____

PROGRAM DIRECTOR

Name: _____

Division: _____

Address: _____

Telephone: _____ E-Mail _____

Signature: _____

FISCAL OFFICER

Name: _____

Title: _____

Address: _____

Telephone: _____

Signature: _____ Institution Tax ID# _____

By signing this application, the fiscal officer assumes full responsibility for the proper administration of funds disbursed from the Endocrine Fellows Foundation to the sponsoring institution and for the maintenance of accurate and complete financial records documenting the use of these funds.

PROTECTION OF HUMAN SUBJECTS

It is the policy of the Endocrine Fellows Foundation that no research activity involving human subjects shall be undertaken with the support of an Endocrine Fellows Foundation research grant, unless the Institutional Review Board has reviewed and approved such activity and the institution has submitted to the Endocrine Fellows Foundation a certification of such reviews and approval.

1. Declaration that human subjects either would or would not be involved:

A. No human subjects will be involved.
(Check box and proceed to Page 7)

B. Human subjects will be involved.
(Check box and proceed to Item 2)

2. Title of proposal: _____

3. Fellow: _____

4. Declaration of certification of review:

The signer certifies that all activities related to the use of human subjects in the study proposed in this application have been reviewed and approved by the Institutional Review Board of this institution, in a convened meeting held on _____.

5. Name and address of institution: _____

Title of institutional officer: _____

Signature: _____

Telephone: _____ Date: _____

If you are not able to obtain a signature prior to the deadline, a completed copy may be returned by October 15, 2010. See note on page 2.

PROTECTION OF ANIMAL SUBJECTS

It is the policy of the Endocrine Fellows Foundation that no research activity involving animal subjects shall be undertaken with the support of an Endocrine Fellows Foundation research grant, unless the Animal Research Committee has reviewed and approved such activity and the institution has submitted to the Endocrine Fellows Foundation a certification of such reviews and approval.

1. Declaration that animal subjects either would or would not be involved:

- A. No laboratory animal subjects will be involved.
(Check box and proceed to Page 8)

- B. Laboratory animal subjects will be involved.
(Check box and proceed to Item 2)

2. Title of proposal: _____

3. Fellow: _____

4. Declaration of certification of review:

The signer certifies that all activities related to the use of animal subjects in the study proposed in this application have been reviewed and approved by the Institutional Review Board of this institution, in a convened meeting held on _____

5. Name and address of institution: _____

Title of institutional officer: _____

Signature: _____

Telephone: _____ Date: _____

If you are not able to obtain a signature prior to the deadline, a completed copy may be returned by October 15, 2010. See note on page 2.

RESEARCH INVOLVING BIOHAZARDS*

It is the policy of the Endocrine Fellows Foundation that no research activity involving biohazards shall be undertaken with the support of an Endocrine Fellows Foundation research grant, unless the appropriate institutional committee has reviewed and approved such activity and the institution has submitted to the Endocrine Fellows Foundation a certification of such reviews and approval.

1. Declaration that biohazards either would or would not be involved:

A. No biohazards will be involved.
(Check box)

B. Biohazards will be involved.
(Check box and proceed to Item 2)

2. Title of proposal: _____

3. Fellow: _____

4. Declaration of certification of review:

The signer certifies that this application, which does propose research activities involving biohazards, has been reviewed and approved by our institutional committee in a convened meeting held on _____.

4. Name of institutional committee and name and address of institution:

Title of institutional officer: _____
(Or title of sponsor if no biohazards are involved.)

Signature: _____

Telephone: _____ Date: _____

*Radioactive compounds, chemical carcinogens, infectious agents, or recombinant DNA.

If you are not able to obtain a signature prior to the deadline, a completed copy may be returned by October 15, 2010. See note on page 2.