**CENTER FOR ADDICTION AND PAIN PREVENTION**

**AND INTERVENTION**

**GRANT APPLICATION FORM**

# Check One Category: (1) \_\_ Basic (2) \_\_ Clinical/Translational (3) \_\_Population-level

**(1)** **Title of Project:**

**(2) Principal Investigator Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Years in Rank:** \_\_\_\_\_\_

\_\_ **Tenure Track** \_\_ **Non-Tenure Track**

* **I confirm that I am an Assistant Professor without extramural funding (other than a career development K awards). K applicants are welcome to apply.**

**(3) Applicants Rank Department/Center**

|  |  |  |
| --- | --- | --- |
| (Primary Applicant) |  |  |
| (Collaborator, if applicable) |  |  |
|  |  |  |
|  |  |  |

**(4) Abstract (250 word)**

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| --- |
|  |

**(5)** \_\_ **Human Use (IRB)**  \_\_ **Animal Use (IACUC) \_\_Does not need approval**

**(6)** **Budget Request: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***(Budget Recommendation: $\_\_\_\_\_\_\_\_\_\_\_*** *(To be completed by Review Group Chair))*

**(7) Goals, Specific Aims, Benchmarks, Benefits and Next Steps (i.e., how this project will inform a larger project, potentially lead to a NIH or other grant) (Limit 1 page):**

**(8) Description of project, including Background/Significance, Innovation, and Approach (Limit 2 page):**

# (9) Award Budget (Limit 1 page)

# (Following this basic format, the table below is a sample, insert *your own* 1-year budget and remove what is not relevant. You do not need to include this sample table in your application).

**Please note: The grant is limited to $25,000 for one year**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Budget Category** |  |  **Year 1** |  |  |
|  |  |  |  |  |  |
|  | Annual Operating Expenses |  |  |  |  |
|  |  |  |  |  |  |
|  |  RA Salary Expenses |  | $13,000 |  |  |
|  |  Supplies |  | 10,000 |  |  |
|  |  Patient Care Costs |  | 2,000 |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | Total Annual Operating Expenses |  | $25,000 |  |  |
|  |  |  |  |  |  |
|  | Other Expenses |  | 0 |  |  |
|  |  |  |  |  |  |
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|  | **Total Costs** |  | **$25,000** |  |  |
|  |  |  |  |  |  |

**(10)** **Budget Justification and list of other sources of funding (internal or external) available to support the proposed research (Limit 1 page):**

**(11) Biosketch of PI and Co-Investigators- Limit 5 pages per biosketch; Please use NIH format.**