OMB #0925-0046-22 Exp. Date: 10/31/2006

NCI/OCCAM Funding Directory Follow-Up Survey

				Screener Questions			
1a.	L. Does your organization ever provide funds to individuals outside the organization, to support cancer research? Examples of this funding could include research grants, fellowship grants, funding for demonstration projects, funding for conference or related travel, support for educational materials, or other types of funding).						
	$\square_{\scriptscriptstyle 1}$ Yes			\square_2 No \rightarrow GO TO END			
1b.	Does your o		ave an open grant app	plication process (i.e., do you accept grant applications that are initiated by			
	$\square_{\scriptscriptstyle 1}$ Yes			\square_2 No \rightarrow GO TO END			
2.	Does your o	organization us	se a <u>peer review syste</u>	tem to evaluate grant applications?			
	☐₁ Yes			□ ₂ No			
3.	Has your organization ever funded research to examine the use of complementary and alternative medicine (CAM) therapies for the diagnosis, prevention or treatment of cancer, cancer-related symptoms or side-effects of conventional therapy? Please note that our definition of CAM covers a broad range of therapies, including exercise therapies, manipulative therapies, nutritional therapies, and several others. (Click Previous Page button below for list of the categories of CAM therapies with some examples)						
	☐₁ Yes			□ ₂ No			
4.	Would your	organization (consider funding CAM	M cancer research in the future?			
	□₁ Yes			\square_2 No \rightarrow GO TO END			
				Contact Info			
	ase complete llicants.	(or update) the	e fields below to provide	e information about your organization, and up to two points of contact for grant			
5.	About Your	Organization					
		Name:					
	,	Website:					
		Phone:					
		Fax:					
		Email:					
		Address 1:					
		Address 2:					
		City:					
		State:					

		Zip:							
		Country:							
6.	First Point	of Contact							
		Full Name:							
		How should	this person be	e addressed in v	vritten materials?				
		Position:							
		Phone:							
		E-Mail:							
		Notes:							
7.	Second Po	oint of Contac	t						
		Full Name:							
			this person be	e addressed in v	vritten materials?		_		
		Position:							
		Phone:							
		E-Mail:							
		Notes:							
				Types of	Research Funded				
8.	Which of t	he following t	vnes of cance		you funded in the past?	2 Which	would you co	nsider fundi	na in the
J .	future?								ing in the
			iueni musi sei	iedi al ieasi one	of these items, or provi				
					Have Funded in P	ast	May Fund ir	Future	

	Have Funded in Past	May Fund in Future
a. Brain		
b. Breast		
c. Colon		
d. Lung		
e. Leukemia, Lymphoma, Multiple Myeloma		
f. Ovarian		
g. Pancreatic		
h. Prostate		
i. General (i.e. not type-specific)		

9.	Please describe any other types of cancer research that you have funded in the past or that you would consider fundir in the future.	ıg

Alternative Medicine Systems	future?	(To see a definition of each CAM therapy, hover y Respondent must select at least	our mouse pointer over the name of the co one item from the "future" column,	
a. Alternative Medicine Systems b. Energy Therapies c. Exercise Therapies c. Exercise Therapies d. Manipularive Herapies e. Mind-Body Interactions f. Nurrisional Therapouties g. Pharmacological / Biologic Therapies l. Springal Therapies l. Page describe any other types of CAM research that you have funded in the past or that you would consider funding in the future. Typical Funding Please answer the following questions about the grants that your organization awards in a typical year. 12. Cancer Research Grants Number of grants per year: Typical length of grant (or range): Typical length of grant (or range): Typical length of grant (or range): 13. CAM Research Grants Number of grants per year: Dollar value of grant (or range): Typical length of grant (or range): Typical l			Hayo Funded in Pact	May Fund in Future
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C. Exercise Theraples G. Manipulative Theraples G. Mind-Body Interactions F. Nutritional Therapeuties G. Pharmacological / Biologic Therapies H. Spiritual Therapeuties G. Pharmacological / Biologic Therapies H. Spiritual Therapies Typical Funding Please answer the following questions about the grants that you roganization awards in a typical year. 12. Cancer Research Grants Number of grants per year: Dollar value of grants per year: Typical length of grant (or range): Conference Grants Grants to Community-Based Institutions Grants to Community-Based Institutions Grants to Community-Based Institutions Grants to Research Project Grants (Basic Research) Respondent mat select at least one of these items Program Development Grants Research Project Grants (Basic Research) Research Project Grants (Clinical Research)				
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g. Pharmacological / Biologic Therapies		e. Mind-Body Interactions		
11. Please describe any other types of CAM research that you have funded in the past or that you would consider funding in the future. Typical Funding		f. Nutritional Therapeutics		
Typical Funding Typical Funding				
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12. Cancer Research Grants Number of grants per year: Dollar value of grants per year: Typical grant amount (or range): Typical length of grant (or range) 13. CAM Research Grants Number of grants per year: Dollar value of grants per year: Typical grant amount (or range): Typical length of grant (or range): 14. Which of the following types of grants might your organization award to support cancer CAM research? (Check all that apphy) Respondent must select at least one of these items Grants to Community-Based Institutions Grants in Eventuarion Projects Facilities Construction Grants Fellowship Grants (Pre-Doctoral) Fellowship Grants (Pre-Doctoral) Grants to Research Institutions Grants to Research Institutions Grants to Research Institutions Research Project Grants (Basic Research) Research Project Grants (Clinical Research) Research Project Grants (Clinical Research) Research Project Grants (Translational Research) Research Project Grants (Translational Research) Research Project Grants (Translational Research) Grants other (please specify):			Typical Funding	
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Organizational Info	☐₁ Gra ☐₁ Co ☐₁ De ☐₁ Fac ☐₁ Fel ☐₁ Fel ☐₁ Gra ☐₁ Gra ☐₁ Re: ☐₁ Re: ☐₁ Re: ☐₁ See	Respondent must select at least ants to Community-Based Institutions inference Grants monstration Projects cilities Construction Grants (lowship Grants (Pre-Doctoral) (lowship Grants (Post-Doctoral) ants to Research Institutions ants to support individual researcher's careers ogram Development Grants (Basic Research) search Project Grants (Clinical Research) search Project Grants (Translational Research or developmental support Grants	one of these items	cer CAM research? (Check all that apply)
		(Organizational Info	

10. Which of the following types of CAM research have you funded in the past? Which would you consider funding in the

5.		provide a description of your organization's grant application and review processes. If this information is av web, or in published materials, please provide instructions about how applicants can access this information	
5 .	What is	the typical length of time between receipt of a grant application and notification of acceptance or rejection?	>
	What is	the typical length of time between acceptance of a grant application and funding?	
		provide an overview of your organization's mission. If this information is available on the web, or in published in the web, or in the web, o	ed
	Does yo projects	our organization have other priorities beyond those in its mission (e.g. short-term special calls for research s on specific topics)?	