G.410 - PHS 398 Career Development Award Supplemental Form

View Burden Statement				nber: 0925-00 Date: 3/31/20
Introduction				
 Introduction to Application (for Resubmission and Revision applications) 		Add Attachment	Delete Attachment	View Attachme
Candidate Section				
2. Candidate Information and Goals for Career Development	A	Add Attachment	Delete Attachment	View Attachme
Research Plan Section				
3. Specific Aims	A	Add Attachment	Delete Attachment	View Attachme
4. * Research Strategy	A	Add Attachment	Delete Attachment	View Attachme
 Progress Report Publication List (for Renewal applications) 	A	Add Attachment	Delete Attachment	View Attachme
Training in the Responsible Conduct of Research	A	Add Attachment	Delete Attachment	View Attachme
Other Candidate Information Sec	tion			
7. Candidate's Plan to Provide Mentoring		Add Attachment	Delete Attachment	View Attachme
Mentor, Co-Mentor, Consultant,	Collaborators Section			
 Plans and Statements of Mentor and Co- Mentor(s) 		Add Attachment	Delete Attachment	View Attachme
9. Letters of Support from Collaborators, Contributors, and Consultants	A	Add Attachment	Delete Attachment	View Attachme
Environment and Institutional Co	ommitment to Candidate Section			
10. Description of Institutional Environment	A	Add Attachment	Delete Attachment	View Attachme
11. Institutional Commitment to Candidate's Research Career Development	A	Add Attachment	Delete Attachment	View Attachme
Other Research Plan Sections				
The second se		dd Aberbarret	Delete Attechnicat	A Record Attendance
12. Vertebrate Animals 13. Select Agent Research		dd Attachment	Delete Attachment	View Attachme
13. Select Agent Research 14. Consortium/Contractual Arrangements		dd Attachment	Delete Attachment	View Attachme
- [
15. Resource Sharing 16. Authentication of Key Biological and/or		dd Attachment	Delete Attachment	View Attachme
Chemical Resources	Ac	dd Attachment	Delete Attachment	View Attachme

Appendix	
17. Appendix	Add Attachments Delete Attachments View Attachments
* Citizenship	
18. * U.S. Citizen or Non-C	tizen National? 🦳 Yes 📃 No
If no, select most appropr	ate Non-U.S. Citizen option
	With a Permanent U.S. Resident Visa
	With a Temporary U.S. Visa
	Not Residing in the U.S.
	en with a temporary visa applying for an award that requires permanent residency status, and expect to be granted by the start date of the award, check here:

10. Description of Institutional Environment

Who must complete the "Description of Institutional Environment" attachment:

The "Description of Institutional Environment" attachment is required.

Format:

Follow the page limits for the Description of Institutional Environment in the <u>NIH Table</u> <u>of Page Limits</u> unless otherwise specified in the FOA.

Attach this information as a PDF file. See NIH's Format Attachments page.

Content:

Mentored CDA applicants: Describe the institution's research and career development opportunities related to your area(s) of interest, including the names of key faculty members and other investigators relevant to your proposed developmental plan and capable of productive collaboration with the candidate. Indicate how the necessary facilities and other resources will be made available for both career enhancement and the research proposed in this application – refer to the resources description in G.220 - R&R Other Project Information Form, Facilities and Other Resources in your "Description of Institutional Environment" attachment. Describe opportunities for intellectual interactions with other investigators, including courses offered, journal clubs, seminars, and presentations.

The "Description of Institutional Environment" attachment must include a signed letter on institutional letterhead from a President, Provost, Dean, Department Chair, or other key institutional leader that describes and acknowledges institutional commitment to the following areas:

- Ensuring that proper policies, procedures, and oversight are in place to prevent discriminatory harassment and other discriminatory practices;
- Responding appropriately to allegations of discriminatory practices, including any required notifications to the HHS Office of Civil Rights; and
- Adopting and following institutional procedure for requesting NIH prior approval of a change in the status of the Program Director/Principal Investigator (PD/PI) or other senior/key personnel if administrative or disciplinary action is taken that impacts the ability of the PD/PI or other key personnel to continue his/her role on the NIH award as described in the training grant application.

For more information:

- NIH Guide Notice on Harassment and Discrimination Protections in NIH Career Development Applications
- NIH Grants Policy Statement, Section 4.1.2: Civil Rights Protections.
- <u>NIH Grants Policy Statement, Section 8.1.2.6: Change in Status, Including</u> <u>Absence of PD/Pl and Other Senior/Key Personnel Named in the NoA.</u>

Non-mentored CDA applicants: Describe the institution's research and career development opportunities related to your area(s) of interest, including the names of other faculty members who are willing to collaborate with you. Indicate how the necessary facilities and other resources will be made available for both career enhancement and the research proposed in this application – refer to the resources description in G.220 - R&R Other Project Information Form, Facilities and Other Resources in your "Description of Institutional Environment" attachment. Describe opportunities for intellectual interactions with other investigators, including journal clubs, seminars, and presentations.

The "Description of Institutional Environment" attachment must include a signed letter on institutional letterhead from a President, Provost, Dean, Department Chair, or other key institutional leader that describes and acknowledges institutional commitment to the following areas:

- Ensuring that proper policies, procedures, and oversight are in place to prevent discriminatory harassment and other discriminatory practices;
- Responding appropriately to allegations of discriminatory practices, including any required notifications to the HHS Office of Civil Rights; and
- Adopting and following institutional procedure for requesting NIH prior approval of a change in the status of the Program Director/Principal Investigator (PD/PI) or other senior/key personnel if administrative or disciplinary action is taken that impacts the ability of the PD/PI or other key personnel to continue his/her role on the NIH award as described in the training grant application.

For more information:

- NIH Guide Notice on Harassment and Discrimination Protections in NIH Career Development Applications
- NIH Grants Policy Statement, Section 4.1.2: Civil Rights Protections.
- <u>NIH Grants Policy Statement, Section 8.1.2.6: Change in Status, Including</u> Absence of PD/PI and Other Senior/Key Personnel Named in the NoA.

G. 420 – PHS 398 Research Training Program Plan Form

View Burden Statement	PHS 398 Research Trainin	ng Program Plan	OMB Number: 0925-0001 Expiration Date: 3/31/202
Introduction			
 Introduction to Application (for Resubmission and Revision applications) 		Add Attachment	Delete Attachment View Attachment
Training Program Section			
2. * Program Plan		Add Attachment	Delete Attachment View Attachment
3. Plan for Instruction in the Responsible Conduct of Research		Add Attachment	Delete Attachment View Attachment
 Plan for Instruction in Methods for Enhancing Reproducibility 		Add Attachment	Delete Attachment View Attachment
 Multiple PD/PI Leadership Plan (if applicable) 		Add Attachment	Delete Attachment View Attachment
Progress Report (for Renewal applications)		Add Attachment	Delete Attachment View Attachment
Faculty, Trainees and Training	Record Section		
7. Participating Faculty Biosketches		Add Attachment	Delete Attachment View Attachment
8. Letters of Support		Add Attachment	Delete Attachment View Attachment
9. Data Tables		Add Attachment	Delete Attachment View Attachment
Other Training Program Section	on 		
10. Vertebrate Animals		Add Attachment	Delete Attachment View Attachment
11. Select Agent Research		Add Attachment	Delete Attachment View Attachment
12. Consortium/Contractual Arrangements		Add Attachment	Delete Attachment View Attachment
Appendix			
13. Appendix Add Attachn	Delete Attachments View Attachment	ts	

8. Letters of Support

Format:

Combine all Letters of Support into a single PDF file and attach this information here. Do not place these letters in the Appendix. Follow the attachment guidelines on NIH's <u>Format Attachments</u> page.

The Letters of Support instructions will be changing, effective January 25, 2019. Please note that there are two sets of "Content" instructions below, based on the application due dates.

For applications submitted for due dates on or before January 24, 2019:

Content:

Attach letters here from:

- Consultants, if applicable. Letters should include rate/charge for consulting services and confirm their role(s) in the project.
- Senior Administration Officials. This letter should be a signed letter on institutional letterhead, and it should describe the applicant institution's commitment to the planned program.

Check the FOA (particularly for non-NRSA programs) to determine whether any additional program-specific letters of support are required.

For applications submitted for due dates on or after January 25, 2019:

Content:

Attach letters here from:

- Consultants, if applicable. Letters should include rate/charge for consulting services and confirm their role(s) in the project.
- Senior Administration Officials. This letter should be a signed letter on institutional letterhead, and it should describe the applicant institution's commitment to the planned program.
- A President, Provost, Dean, Department Chair, or other key institutional leader. This letter should be a signed letter on institutional letterhead, and it should describe and acknowledge institutional commitment to the following areas:
 - o Ensuring that proper policies, procedures, and oversight are in place to prevent discriminatory harassment and other discriminatory practices;
 - Responding appropriately to allegations of discriminatory practices, including any required notifications to the HHS Office of Civil Rights; and
 - Adopting and following institutional procedure for requesting NIH prior approval of a change in the status of the Program Director/Principal Investigator (PD/PI) or other senior/key personnel if administrative or disciplinary action is taken that impacts the ability of the PD/PI or other key personnel to continue his/her role on the NIH award as described in the training grant application.

Check the FOA (particularly for non-NRSA programs) to determine whether any additional program-specific letters of support are required.

For more information:

 NIH Guide Notice on <u>Harassment and Discrimination Protections in NIH Training</u> <u>Applications</u>.

- <u>NIH Grants Policy Statement, Section 4.1.2: Civil Rights Protections</u>.
- <u>NIH Grants Policy Statement, Section 8.1.2.6: Change in Status, Including</u> Absence of PD/PI and Other Senior/Key Personnel Named in the NoA.

G.430 - PHS Fellowship Supplemental Form

View Burden Statement		OMB Number: 0925-000 Expiration Date: 03/31/202
Introduction	-	
1. Introduction to Application (for Resubmission applications)		Add Attachment Delete Attachment View Attachment
Fellowship Applicant Section		
 Applicant's Background and Goals for Fellowship Training 		Add Attachment Delete Attachment View Attachment
Research Training Plan Section		
3. * Specific Aims		Add Attachment Delete Attachment View Attachment
4. * Research Strategy		Add Attachment Delete Attachment View Attachment
5. * Respective Contributions		Add Attachment Delete Attachment View Attachment
6. * Selection of Sponsor and Institution		Add Attachment Delete Attachment View Attachment
 Progress Report Publication List (for Renewal applications) 		Add Attachment Delete Attachment View Attachment
8. * Training in the Responsible Conduct of Research		Add Attachment Delete Attachment View Attachment
Sponsor(s), Collaborator(s), and Con	sultant(s) Section	
9. Sponsor and Co-Sponsor Statements		Add Attachment Delete Attachment View Attachment
 Letters of Support from Collaborators, Contributors, and Consultants 		Add Attachment Delete Attachment View Attachment
11. Description of Institutional Environment and Commitment to Training Other Research Training Plan Section	n	Add Attachment Delete Attachment View Attachment
Vertebrate Animals		
The following item is taken from the I be made on the Research & Related	Research & Related Other Project Information for Other Project Information form. Are Vertebrate Animals Used?	m and repeated here for your reference. Any change to this item must
12. Are vertebrate animals euthanized?	Yes No	
If "Yes" to euthanasia Is method consistent with American Vet Association (AVMA) guidelines?	erinary Medical Yes No	
If "No" to AVMA guidelines, describe meth scientific justification	od and provide	
13. Vertebrate Animals		Add Attachment Delete Attachment View Attachment

Other Research Training Plan Informa	tion	
14. Select Agent Research		Add Attachment Delete Attachment View Attachment
15. Resource Sharing Plan		Add Attachment Delete Attachment View Attachment
16. Authentication of Key Biological and/or Chemical Resources		Add Attachment Delete Attachment View Attachment
Additional Information Section		
17. Human Embryonic Stem Cells		
* Does the proposed project involve human e	nbryonic stem cells?	No
		ber of the specific cell line(s) from the following list: d at this time, please check the box indicating that
Specific stem c	Il line cannot be referenced at this time. One fi	rom the registry will be used.
Cell Line(s):		
X		
	Add	
	100	
18. Alternate Phone Number:		
19. Degree Sought During Proposed Award:		
Degree:		If "other", indicate Expected Completion Date degree type: (MM/YYYY):
		▼ Reset Entry
		▼ Reset Entry
20. * Field of Training for Current Proposal:		Reset Entry
20. * Field of Training for Current Proposal:		
20. * Field of Training for Current Proposal:		Reset Entry
21. * Current or Prior Kirschstein-NRSA Supp	rt? Yes No	
	rt? Yes No	
21. * Current or Prior Kirschstein-NRSA Supp	rt? Yes No n-NRSA support below:	
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste	rt? Yes No n-NRSA support below:	
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste Level * Type	nt? Yes No n-NRSA support below: Start Date (# known) End D	Date (# known) Grant Number (# known)
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste Level * Type	rt? Yes No n-NRSA support below:	Date (# known) Grant Number (# known)
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type X	nt? Yes No n-NRSA support below: Start Date (# known) End D	Date (# known) Grant Number (# known)
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type X 22. * Applications for Concurrent Support	rt? Yes No n-NRSA support below: Start Date (# known) End D	Pate (# known) Grant Number (# known) Reset Entry
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file:	rt? Yes No n-NRSA support below: Start Date (# known) End D	Date (# known) Grant Number (# known)
21. * Current or Prior Kirschstein-NRSA Suppi If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship:	rt? Yes No n-NRSA support below: Start Date (# known) End D Add	Date (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non	rt? Yes No n-NRSA support below: Start Date (# known) End D Add Yes No Citizen National? Yes No	Pate (f known) Grant Number (f known) Reset Entry Add Attachment Delete Attachment View Attachment
21. * Current or Prior Kirschstein-NRSA Suppi If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship:	rt? Yes No n-NRSA support below: Start Date (# known) End D Add	Pate (f known) Grant Number (f known) Reset Entry Add Attachment Delete Attachment View Attachment
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non	rt? Yes No n-NRSA support below: Start Date (# known) End D Add Yes No Citizen National? Yes No	Pate (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment View Attachment B. Resident Visa
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non Non-U.S. Citizen	rt? Yes No n-NRSA support below: Start Date (# known) End D Add Yes No Citizen National? Yes No With a Permanent U.S With a Temporary U.S	Date (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment View Attachment Resident Visa S. Visa
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non Non-U.S. Citizen	nt? Yes No Add Yes No Citizen National? Yes Vith a Permanent U.S Vith a Temporary U.S	Pate (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment View Attachment B. Resident Visa
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non Non-U.S. Citizen If you are a non-U.S. citizen with a ter	rt? Yes No n-NRSA support below: Start Date (# known) End D Add Yes No Citizen National? Yes No With a Permanent U.S With a Temporary U.S With a Temporary U.S Porary visa applying for an award that requires vard, check here:	Date (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment View Attachment Resident Visa S. Visa
21. * Current or Prior Kirschstein-NRSA Supp If yes, identify current and prior Kirschste * Level * Type 22. * Applications for Concurrent Support If yes, describe in an attached file: 23. * Citizenship: U.S. Citizen U.S. Citizen or Non Non-U.S. Citizen If you are a non-U.S. citizen with a ter	nt? Yes No Add Yes No Citizen National? Yes Vith a Permanent U.S Vith a Temporary U.S	Date (# known) Grant Number (# known) Reset Entry Add Attachment Delete Attachment View Attachment Resident Visa S. Visa

Budget Section					
All Fellowship Applicants:					
25. * Tuition and Fees:	None Requested	Fur	nds Requested:		
	Ye	ar 1			
		ar 2			
		ar 3			
		ar 4 Par 5			
		ar 6 (when applicable)			
			[
Senior Fellowship Applicants		otal Funds Requested:			
	Am	nount	Academic Period	Number of Months	Reset Entry
26. Present Institutional Base	Salary:		•		Reset Entry
27. Stipends/Salary During Fir	st Year of Proposed Fellowship		bl		
a. Federal Stipend Reque		nount	Number of Months		
b. Supplementation from 0		nount	Number of Months		
		pe (e.g., sabbatical lea∨e,	salary)		
	So	urce			
Appendix					
8. Appendix	Add Attachments	Delete Attachments	View Attachments		

11. Description of Institutional Environment and Commitment to Training

Who must complete the "Description of Institutional Environment and Commitment to Training" attachment:

The "Description of Institutional Environment and Commitment to Training" attachment is required, and includes "Educational Information" for F30 and F31 applications.

Format:

Follow the page limits for the Description of Institutional Environment and Commitment to Training in the <u>NIH Table of Page Limits</u> unless otherwise specified in the FOA.

Attach this information as a PDF file. See NIH's Format Attachments page.

Content:

Document a strong, well-established research program related to the candidate's area of interest. Describe opportunities for intellectual interactions with other individuals in training and other investigators, including courses offered, journal clubs, seminars, and presentations. Indicate the facilities and other resources that will be made available for both career enhancement and the research proposed in this application. Refer to the resources description in G.220 - R&R Other Project Information Form, Facilities and Other Resources, and information provided in the Sponsor and Co-sponsor Statements attachment.

The "Description of Institutional Environment and Commitment to Training" attachment must include a signed letter on institutional letterhead from a President, Provost, Dean, Department Chair, or other key institutional leader that describes and acknowledges institutional commitment to the following areas:

- Ensuring that proper policies, procedures, and oversight are in place to prevent discriminatory harassment and other discriminatory practices;
- Responding appropriately to allegations of discriminatory practices, including any required notifications to the HHS Office of Civil Rights; and
- Adopting and following institutional procedure for requesting NIH prior approval of a change in the status of the Program Director/Principal Investigator (PD/PI) or other senior/key personnel if administrative or disciplinary action is taken that impacts the ability of the PD/PI or other key personnel to continue his/her role on the NIH award as described in the training grant application.

For more information:

- NIH Guide Notice on Harassment and Discrimination Protections in NIH Fellowship Applications.
- <u>NIH Grants Policy Statement, Section 4.1.2: Civil Rights Protections</u>.
- <u>NIH Grants Policy Statement, Section 8.1.2.6: Change in Status, Including</u> <u>Absence of PD/PI and Other Senior/Key Personnel Named in the NoA.</u>

F30 and F31 applications: Educational Information

Describe the institution's dual-degree (F30) or graduate (F31) program in which the applicant is enrolled. This description should include the structure of the program, the required milestones and their usual timing, the number of courses, any teaching commitments, clinical requirements, qualifying exams, and the average time to degree over the past 10 years. Describe the progress/status of the applicant in relation to the program's timeline, and the frequency and method by which the program formally monitors and evaluates a student's progress.

For F30 applications specifically, describe any clinical tutorials during the graduate research years and any activities to ease transition from the graduate to the clinical

years of the dual-degree program. Describe any research-associated activities during the clinical years of the dual-degree program.

Include the name of the individual providing this information at the end of the description. This information is typically provided by the director of the graduate program or the department chair.