



AND



***The Florida Center for Brain Tumor Research (FCBTR) and
Accelerate Brain Cancer Cure (ABC²)***

ANNOUNCE RESEARCH GRANT AWARDS 2015

*Applications are being accepted for the 2015 Research Grant Awards Program supported by FCBTR and ABC². Applications are due in the FCBTR office no later than **December 15, 2014** at midnight for proposals that will be awarded February 15, 2015.*

Proposals may be Basic Science, Translational, or Clinical and should be designed to move the discovery of treatments and cures for brain tumors forward.

When applicable, tissue, DNA derived from peripheral blood, and associated clinical data should be requested from the FCBTR biorepository as part of the application process. Use of FCBTR resources is desirable.

The Florida Center for Brain Tumor Research, funded by the Florida Legislature, supports projects that lead to the discovery of brain tumor cures and the development of improved brain tumor treatment modalities.

ABC² is an exemplary non-profit association that believes “there are faster and better ways to develop new effective treatments for patients by breaking down the obstacles and driving collaboration to accelerate a cure.”

Grants will be reviewed by an independent panel selected by ABC² and will consist of members from academic institutions outside the state of Florida.

There is one competition each year. Applicants must apply by midnight December 15, 2014.

Grant Program Description

FCBTR and ABC² seek proposals to develop new findings, strategies, products, procedures and innovative ideas leading to improved treatments of brain tumors.

Award Information

A grant is for two years. Grants of between \$50,000 and \$100,000 will be available.

Eligibility

- Must be a researcher in the state of Florida.
- If awarded, must be willing to present findings at the Florida Center for Brain Tumor Research's Annual Brain Tumor Biomedical Technology Summit in May of the year following the end of your grant.

Grant Application Form

Date: / /

Name and Title:

Institution:

Department:

Mailing Address:

City:

State:

Zip:

Shipping Address:

City:

State:

Zip:

Phone:

Fax:

E-mail Address:

Grant Proposal

1. Abstract [250 words or less] *(Include a concise paragraph that summarizes the proposed study.)*

2. Hypothesis and Specific Aims [1 page maximum] *(Number the Specific Aims in this Section and refer to them throughout the remainder of the proposal)*

3. Background & Significance [1 page maximum] *(State why this project is the next logical step in the development of your body of work. Comment on your ability to carry out this project; what are the challenges; what do you expect the impact of the findings to be.)*

4. Preliminary Results [1 page maximum]

5. Research Plan & Methods [2 pages maximum] (*Discuss experimental design and methodology. Include statistical considerations, if applicable*)

6. Research Category (*Select all that apply*)

- | | |
|---|---|
| <input type="checkbox"/> Cancer/Stem Cell Biology | <input type="checkbox"/> Genomics & Proteomics |
| <input type="checkbox"/> Radiation Biology & DNA Repair | <input type="checkbox"/> Biology, Oncogene & Cell Cycle |
| <input type="checkbox"/> Immunology | <input type="checkbox"/> Tissue Imaging |
| <input type="checkbox"/> Clinical Trials | <input type="checkbox"/> Epidemiology |
| <input type="checkbox"/> Cancer Pharmacology/Experimental Therapeutics | <input type="checkbox"/> Other |
| <input type="checkbox"/> Biomedical Informatics & Biomedical Computation Research | |

7. IRB or IACUC Approval Letter

Attach a copy of your IRB or IACUC approval letter to this request when applicable. No funding or tissue will be released from the Florida Center for Brain Tumor Research Office until a required approval letter is on file.

If requesting Tumor, Blood, or Control Tissue, please fill out the information below:

BRAIN TUMORS

Tumor Type:

<input type="checkbox"/> Frozen	How many?
Weight/mg	

Inclusion Criteria

- Age Limits: None Sex: Male Female No Selection
- Race: White Black/African American Asian/Pacific Islander
- Ethnicity: American Indian/Alaskan Native No Selection
- Hispanic Non-Hispanic No Selection

Additional Specifications: None Type:

Justification for Amount of Tissue Requested:

FLUIDS/DNA

<input type="checkbox"/> DNA	How many?
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Inclusion Criteria

Age Limits: None Sex: Male Female No Selection
Race: White Black/African American Asian/Pacific Islander
 American Indian/Alaskan Native No Selection
Ethnicity: Hispanic Non-Hispanic No Selection
Additional Specifications: None

Justification for Amount of Fluids/DNA Requested:

NON-TUMOR (CONTROL) TISSUE

<input type="checkbox"/> Frozen	How many?
Dimensions/mg	

Inclusion Criteria

Age Limits: None Sex: Male Female No Selection
Race: White Black/African American Asian/Pacific Islander
 American Indian/Alaskan Native No Selection
Ethnicity: Hispanic Non-Hispanic No Selection
Additional Specifications: None

Justification for Amount of Control Tissue Requested:

Publication Policy

It is understood and agreed that prompt publication of results of research conducted using Florida Center for Brain Tumor Research (FCBTR) resources is desired; and to that end, all Investigators shall be encouraged to publish results of such research in accordance with the publication policy of their institution.

Subject to the acknowledgment requirement, each party shall be free to use the results of its research for its own non-commercial teaching, research, educational, clinical and publication purposes without the payment of royalties or other fees.

Abstracts and manuscripts detailing results of studies utilizing samples or funding from the FCBTR Brain Tumor Tissue Repository shall acknowledge the FCBTR as the source of the samples regardless of the FCBTR affiliation of the Investigators or Authors.

Prior to submission of the abstract or manuscript, each Investigator shall forward a copy to the Coordinator of the FCBTR for purposes of inclusion in the FCBTR Brain Tumor Tissue Repository Database and the FCBTR bibliography.

Each Investigator shall provide one reprint of each published article involving tissue obtained from the FCBTR Tissue Repository to the Coordinator.

Acknowledgment Policy

If findings result in a publication, please include the following statement in the Acknowledgements or Methods section of your manuscript:

“Tissue used in this project was provided by the Florida Center for Brain Tumor Research.”

Or

“Support for this project was provided by the Florida Center for Brain Tumor Research and Accelerate Brain Cancer Cure.”

Human Subject Protection Policy

In accordance with federal regulations, it is the responsibility of each Investigator to obtain appropriate approval from their local Institutional Review Board (IRB). No specimens will be released without an official approval letter on file in the FCBTR Office.

Intended Use of Tissue Policy: It is the policy of the Florida Center for Brain Tumor Research to limit the use of the tissue provided to you for that purpose for which it was explicitly requested. You must request permission in writing for any additional use.

Confidentiality Agreement

A University of Florida IRB Confidentiality Agreement form between FCBTR and the recipient Investigator must be completed and signed before tissue will be released.

I agree to abide by the policies listed above.

Investigator’s signature: _____

Date: / /

Request Approved by: _____

Date: / /

Supplementary Materials

- NIH-style Biosketch for Principal Investigator and Key Personnel (each biosketch can be no longer than 4 pages)

- Statement of career goals (250 words or less)
- Letter of support from your supervisor or Department Chair, or letter of support from your research mentor or director of the laboratory in which the investigation will be conducted
- Research proposal should not exceed 5 ½ pages
- Statement of any other pending, concurrent applications for the same research project
- Statement of any other pending, concurrent applications for the same research project

Budget Summary

Title:

Principal Investigator:

	Year 1	Year 2	Total
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1. Personnel

- A. Salaries and Wages
- B. Fringe Benefits
- C. Consultants and Contract Services

II. Non-Personnel

- A. Space Costs
- B. Rental, Lease or Purchase of Equipment
- C. Consumable Supplies
- D. Patient Care
- E. Travel
- F. Telephone
- G. Other Costs

Submission Dates and Times

- **Final Deadline: December 15, 2014**

Applications must be submitted electronically by midnight Eastern Time on December 15, 2014 to frentzen@ufl.edu.

FCBTR support begins no earlier than April 1, 2015.

Application Review Information

The FCBTR staff will acknowledge receipt of the application soon after we receive it. The following evaluation criteria and weights will be used by the review panel to form recommendations:

Criteria for Judging Projects

1. Scientific Impact. *(30 percent)*
2. Quality and extent of innovation. *(30 percent)*
3. Ability to complete the project's proposed objectives, judged by the qualifications of the investigators and the reasonableness of the work plan and budget. *(25 percent)*
4. Feasibility of some day implementing the research findings into a real-world product / procedure / treatment *(15 percent)*

Application Review Process

Projects will be reviewed first by FCBTR staff members for completeness of application.

Projects will then be sent to an **independent review panel selected by ABC² from outside the state of Florida** for final decision regarding awards.

Award Administration Information

Notification

Grants are contingent upon available appropriated funds. In some cases, the Center will adjust grant amounts depending upon the number of recommended proposals, priorities, and total budget. Grant applicants will be notified within 2 weeks of the panel's decision.

Agency Contact

Applicants are encouraged to contact Barbara Frentzen, FCBTR Administrator, at 352.294.0517, or frentzen@ufl.edu who may:

- Advise the applicant about the review process;
- Answer questions about what activities are eligible for support.