

APPLICATION FOR A FELLOWSHIP AWARD

Applicant (Graduate Student, Post-doc, Fellow or Residents only)

Name

Title

Department/Division

Email

Demographic information of the applicant only (The following two demographic sections are **OPTIONAL.** Your response will be kept strictly confidential and demographic data of our UCLA JCCC Fellowship program will not affect your score and will only ever be reported in aggregate. We ask for this information in an effort to better understand our membership and better enable our Center to live up to its commitment of promoting equity, diversity and inclusion across all of our activities.)

Male Female Non-Binary/Genderqueer Transgender: Trans Man/Trans Woman Prefer to self-describe, please use text box

Prefer not to answer

Please identify yourself as any of the below groups:

African American/Black	Asian
American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander
Latino (all races)	White

Two or more races, select all from the categories above

Other, please use text box to tell us the race/ethnicity you identify with:

Faculty Mentor

Name

Telephone

Email

Fund Manager Contact

Name

Telephone

Email

Title of Research Project

Do you plan to use any of the following UCLA JCCC resources (Check all that apply)

Clinical Research Unit (CRU) Flow Cytometry (FCSR) Genomics (GSR) Molecular Screening (MSSR) Small Animal Imaging (SAISR) Translational Pathology Core Laboratory (TPCL) Biostatistics, Analytical Support and Evaluation (BASE)

Approvals

For consideration of this grant, applications must also be submitted to the appropriate University Committee(s) by the grant deadline. If this application is approved, funds will not be allocated until the appropriate approval forms have been received by the UCLA JCCC.

1. With respect to the Human Subjects Protection Committee*, check one:

IRB approval enclosed Submitted to the Human Subjects Protection Committee on Human Subjects Protection Committee approval was specifically waived (exempt,

HS-7 form enclosed)

No human subjects or human materials will be used in this study

*Note: committee approval must be obtained **specifically** for the study proposed in this application (i.e., title and identifying data for the study must be identical).

2. With respect to the Animal Research Committee, check one:

Approved AC-2 form enclosed

Submitted to the Animal Research Committee on

No animal subjects or animal materials will be used in this study

- 3. Recombinant DNA/Infectious Agents approval (if appropriate), check one:
 - Biosafety Committee approval enclosed

Submitted for DNA approval on but not yet approved

No recombinant DNA/infectious agent research is involved

Signatures (Please Print Name Above Signature)

Name

Signature

Graduate Student, Post-Doc, Fellow or Resident

Date

Name

Signature

Faculty Mentor

Budget for this Research Project (12 Months) No faculty salaries allowed – salaries for graduate student, post-doc, fellow or resident allowable).

Personnel (Faculty salaries not allowable)					
Name & Position Title	% Effort	Salary	Benefits	Total Funds Requested	
			Personnel Subtotal		
Consumable Supplies (Itemi	ze)				
			Supplies Subtotal		
Research Patient Costs					
	R	esearch Pa	tient Costs Subtotal		
Other Expenses (Equipment must be justified; capital equipment, travel, and non- project specific costs are unallowable)					
		Other	Expenses Subtotal		
Must not exceed maximu	ım allowable budg	let	TOTAL		

Please provide brief justifications for budgeted items.

1a) Scientific abstract of proposed research project (200 words or less).

1b) Lay summary of proposed research project (two to three sentences).

2. Research Proposal

Please follow the guidelines and instructions currently specified by the NIH for F applications, but with the understanding that this application requests funding for only one year. That is, the application should include a one-page Specific Aims section followed by a Research Strategy section. The Research Strategy section (six pages maximum) includes three sub-sections: Significance, Innovation and Approach. In the Significance section, please be sure to emphasize why the research is relevant to the cancer problem. If applicable, please also include how the research is relevant to UCLA JCCC's catchment area, Los Angeles County, and supports diversity, equity, and inclusion. Also, discuss the feasibility of obtaining needed patient samples and include a biostatistical plan, if applicable.

The text must be prepared in 11 point Arial font with 0.5" margins. Figures must be embedded in the application and it is the applicant's responsibility to ensure that figures are at sufficient resolution for a critical evaluation.

Checklist

Please ensure that all items on this checklist are included with your application.

Signatures

Applicant

Faculty Mentor

Copies

One (1) PDF electronic copy

Address/Phone

Applicant's complete contact information (on face page) Mentor's complete contact information (on face page) Fund manager's complete contact information (on face page)

Supporting Documentation

NIH format "Other Support" page

Letters of Support/Recommendation (minimum two, maximum four; one must be from the faculty mentor. Note: Mentors are requested to include a statement on the applicant's

independent contributions to the research plan).

Applicant's Biosketch or CV (**Please only submit Applicant's Biosketch/CV. Please do not** submit mentor's Biosketch)