



NIH



Electronic Submissions

HOW DOES IT WORK?

- PI finds FOA (Funding Opportunity Announcement) through Grants.gov and prints it out.
- PI double-checks that he/she has the correct Adobe software on his/her computer (vers. 8.3 or later) to allow completion of the application package.
- PI then downloads the required Adobe software (if needed) and the application package provided, which provides general instructions for completion.
- **NOTE: Application packages are specific to each FOA and may not be reused or used for other FOA's. If more than one forms package option is available, use only the latest package listed, preferably Adobe forms B-2. The U-01 mechanism is now filed electronically.**
- PI prints Grants.gov SF424 (R&R) Application Guide (Version 2), which provides all the general instructions applicable to most NIH grants.

Make sure correct version of Adobe Reader is Downloaded – Check Grants.gov Web-site

GRANTS.GOV™ Search Contact Us Site Map Help RSS Home

Home » Help » Download Software

DOWNLOAD SOFTWARE

There are software applications that allow you to successfully navigate the Grants.gov pages and complete your application. These applications are:

- [Compatible Versions of Adobe Reader](#)
- [PDF Conversion Programs](#)
- [Download Word Viewer](#)
- [Media Player](#)
- [RealPlayer](#)
- [Flash Player](#)
- [Troubleshooting Tips](#)

Operating System Platform Compatibility Table

Computer	Operating System	Forms Program	Compatible
Mac	Tiger	Adobe Reader (8.1.1,8.1.2,8.1.3,8.1.4,8.1.5,8.1.6,9.0,9.1,9.1.1,9.1.2,9.2,9.3,2,9.4)	Yes
Mac	Leopard	Adobe Reader (8.1.1,8.1.2,8.1.3,8.1.4,8.1.5,8.1.6,9.0,9.1,9.1.1,9.1.2,9.2,9.3,2,9.4)	Yes
PC	WINXP	Adobe Reader (8.1.1,8.1.2,8.1.3,8.1.4,8.1.5,8.1.6,8.1.7,9.0,9.1,9.1.1,9.1.2,9.2,9.3,2,9.4)	Yes
PC	Vista	Adobe Reader (8.1.1,8.1.2,8.1.3,8.1.4,8.1.5,8.1.6,8.1.7,9.0,9.1,9.1.1,9.1.2,9.2,9.3,2,9.4)	Yes

Compatible versions of Adobe Reader

Adobe Reader

You will be asked to specify your Operating System (examples: Windows, Mac) and Version (examples: XP, Vista, 10.4.9) be sure to specify a

FOR APPLICANTS
APPLICANT SYSTEM-TO-SYSTEM
FOR GRANTORS
ABOUT GRANTS.GOV
HELP
General FAQs
Troubleshooting Tips
Public Law 106-107 FAQs
Succeed E-Newsletter
Download Software
Glossary
Stakeholder Webcast
Related Links
Exit Disclaimer
RSS
CONTACT US
SITE MAP

Sign-up for our "Succeed" Quarterly Newsletter

Quick Links
Latest News!
Grants.gov Blog
[Exit Disclaimer]

FOR APPLICANTS
• Grant Search
• Grant Email Alerts
• Get Registered
• Applicant Login
• E-Biz POC Login
• Track My Application

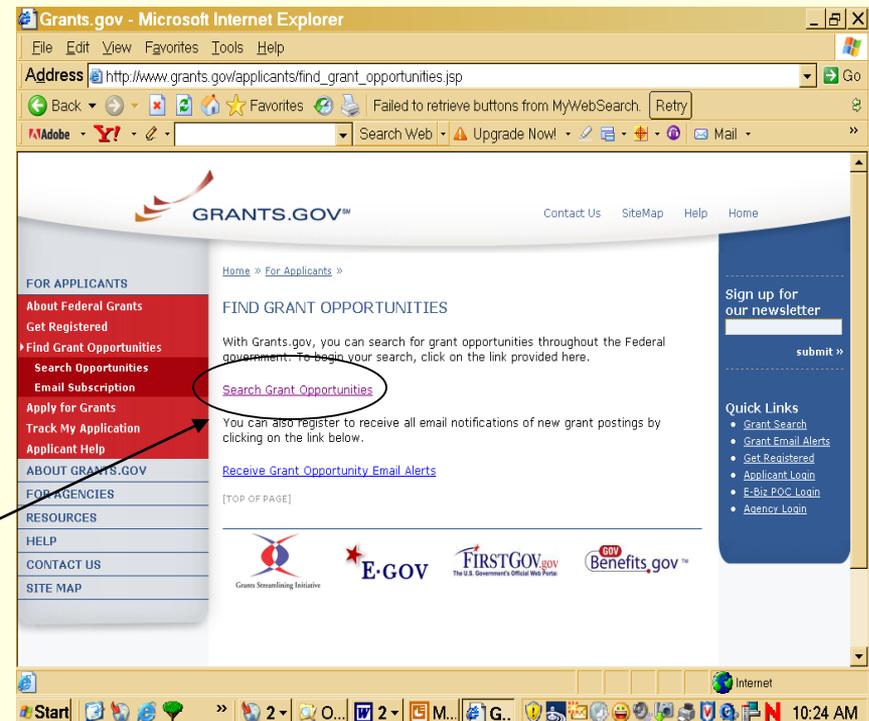
FOR GRANTORS
• Grantor Login
• New Agency Users
• Resources

Error on page. Internet | Protected Mode: Off 100%

Searching for the Funding Opportunity Announcement

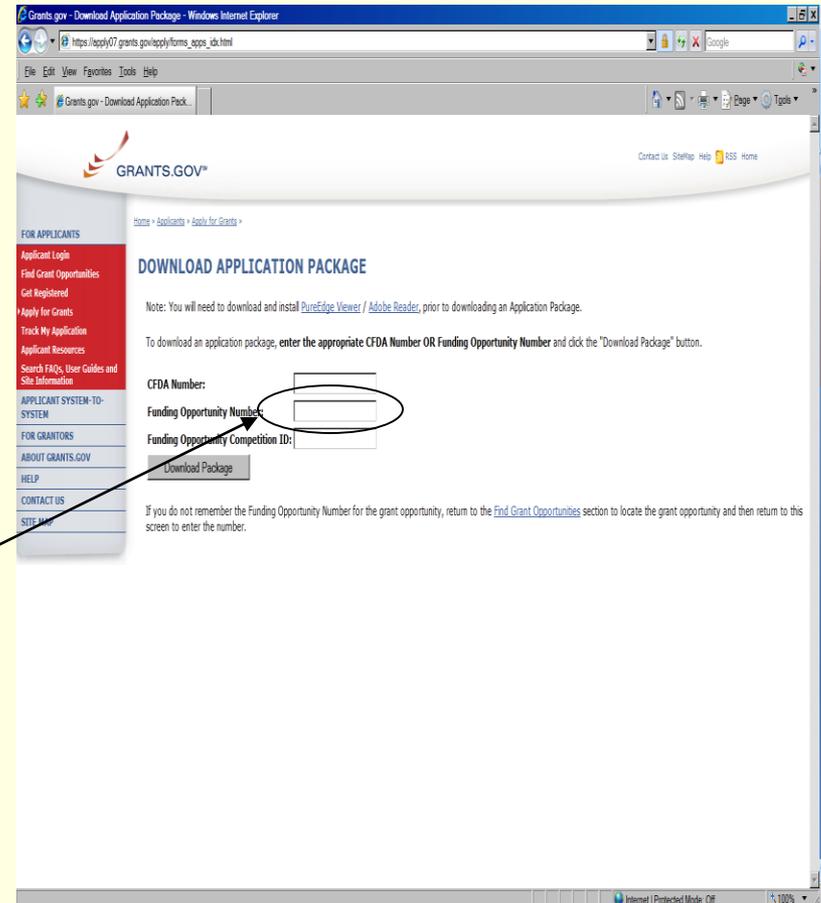
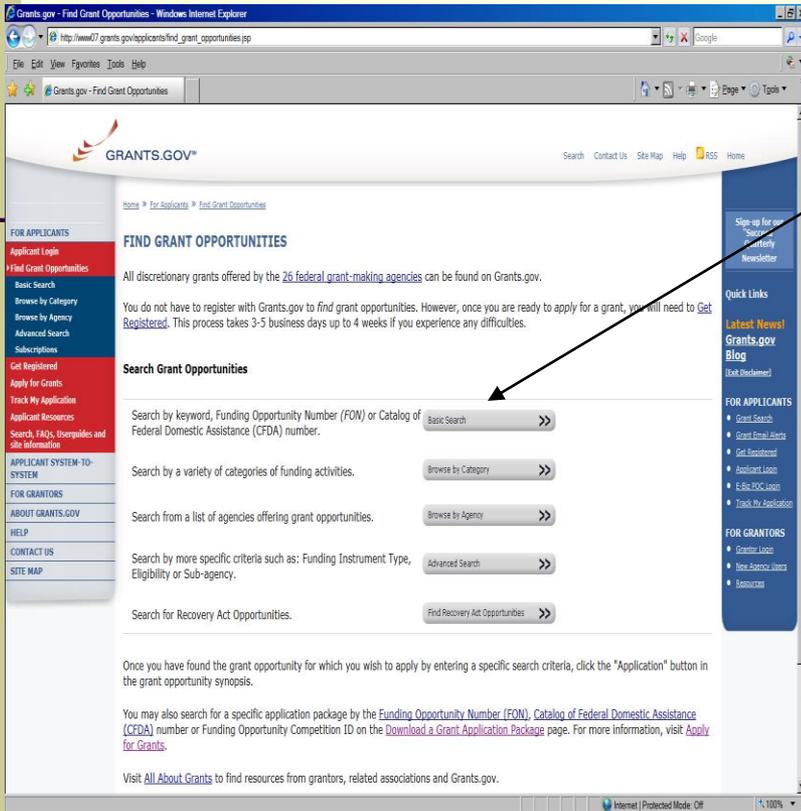


First click On “Find Grant Opportunities”



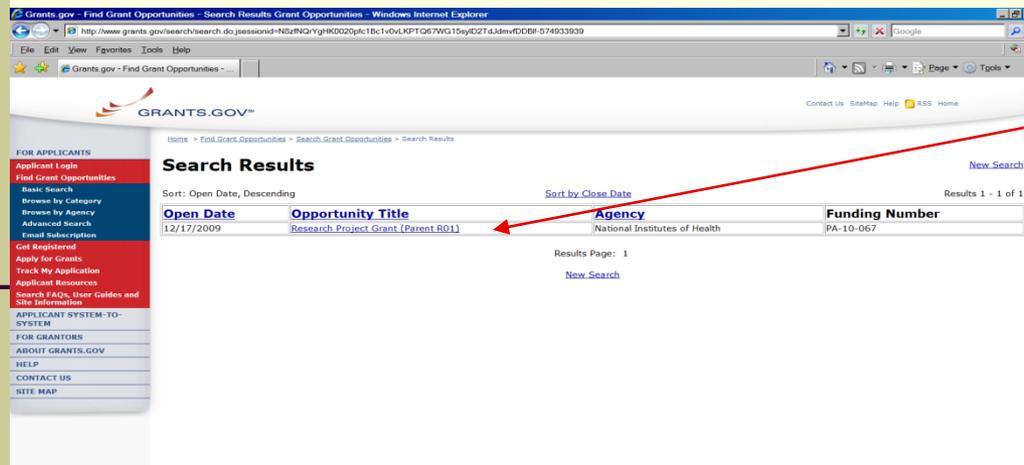
Then, click on “Search Grant Opportunities”

Click on “Basic Search”
to search by Keyword,
FOA #, and CFDA #

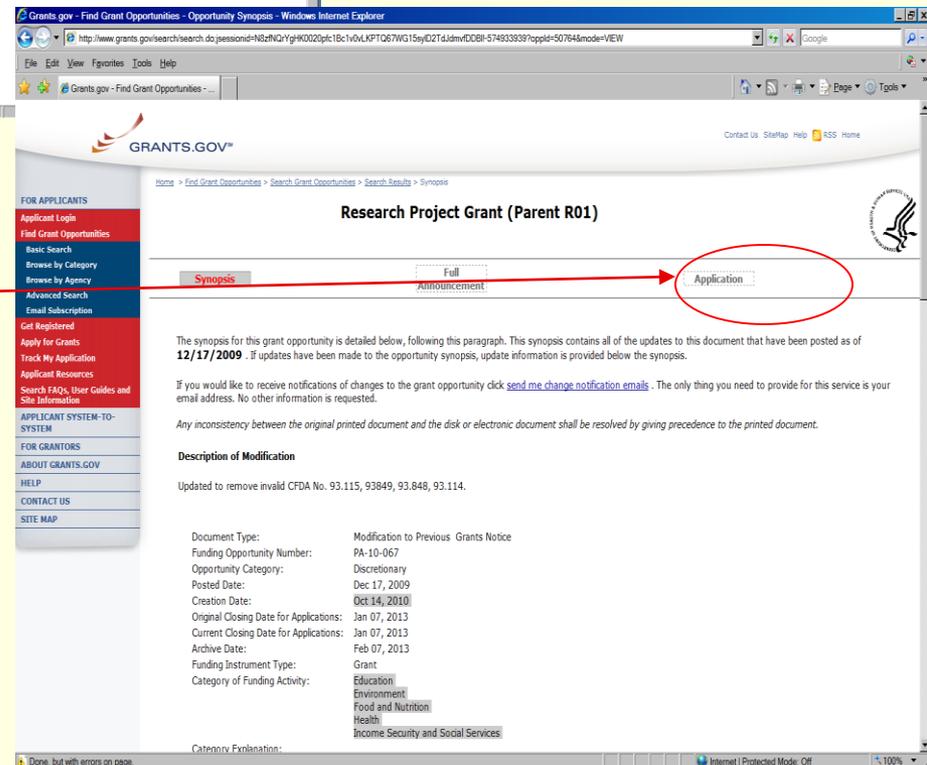


When you have chosen a
Funding Opportunity,
type the FOA # here.

Click on the
“Opportunity Title”
This opens the
synopsis of the
FOA.



Click on “Application” to
download the instructions
and application package.
You will also want to click on
the “Full Announcement”
link for the complete
instructions specific to this
Funding Opportunity.



Make sure you have the right Funding Opportunity Announcement.

Download the latest version, Adobe Forms B-2 Instructions and Application. The instructions included here are the general instructions for completing the Adobe Forms according to NIH business rules.

The screenshot shows the Grants.gov website interface. The sidebar on the left contains a navigation menu with the following items: FOR APPLICANTS, Applicant Login, Find Grant Opportunities, Search Opportunities, Basic Search, Browse by Category, Browse by Agency, Advanced Search, Email Subscription, Get Registered, Apply for Grants, Track My Application, Applicant Resources, Search FAQs, User Guides and Site Information, ABOUT GRANTS.GOV, FOR GRANTORS, RESOURCES, ABOUT GRANTS.GOV, HELP, CONTACT US, and SITE MAP. The main content area is titled "SELECTED GRANT APPLICATIONS FOR DOWNLOAD" and includes instructions on how to download the application and its instructions. A red arrow points from the text on the left to the "ADOBE-FORMS-B2" entry in the table below.

SELECTED GRANT APPLICATIONS FOR DOWNLOAD

Download the application and its instructions by selecting the corresponding download link. Save these files to your computer for future reference and use. You do not need Internet access to read the instructions or to complete the application once you save them to your computer.

READ BELOW BEFORE YOU APPLY FOR THIS GRANT!

Before you can view and complete an application package, you **MUST** have Adobe Reader installed. Application packages are posted in Adobe Reader format. You may receive a validation error using incompatible versions of Adobe Reader. To prevent a validation error, it is now recommended you uninstall any earlier versions of Adobe Reader and install the latest compatible version of Adobe Reader.

If more than one person is working on the application package, **ALL** applicants must be using the same software version.

Click [here](#) to download the required Adobe Reader if you do not have it installed already.

Additional Resources:

- Sign-up for [Grants.gov Updates](#) for the latest issues and news.
- Download [Adobe Reader](#) for free.
- Visit [Help](#) for FAQs and more information on Applying for grants.

Below is a list of the application(s) currently available for the CFDA and/or Funding Opportunity Number that you entered.

To download the application instructions or package, click the corresponding download link. You will then be able to save the files on your computer for future reference and use.

CFDA	Opportunity Number	Competition ID	Competition Title	Agency	Instructions and Application
	PA-11-260	ADOBE-FORMS-B2	ADOBE-FORMS-B2	National Institutes of Health	download

After opening package, PI enters Application Filing Name and saves to safe directory on computer. Note: A shortened version of the project's descriptive title is recommended. (This is for Grants.gov identification only; 35 characters max).

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf - Microsoft Internet Explorer provided

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf

Please fill out the following form.

Save & Submit **Save** **Print** **Cancel** **Check Package for Errors**

GRANTS.GOV™

Grant Application Package

Opportunity Title: Research Project Grant (Parent R01)

Offering Agency: National Institutes of Health

CFDA Number:

CFDA Description:

Opportunity Number: PA-07-070

Competition ID: ADOBE-FORMS-A

Opportunity Open Date: 12/05/2008

Opportunity Close Date: 01/07/2010

Agency Contact:
Grants Info
TTY 301-451-0088
E-mail: GrantsInfo@nih.gov
Phone: 301-435-0714

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name: [Redacted]

Mandatory Documents

SF424 (R & R) Complete

Research & Related Senior/Key Person Profile (E) =>

Research & Related Other Project Information

Research & Related Project/Performance Site Location

PHS 398 Cover Page Supplement

PHS 398 Research Plan

PHS 398 Checklist <=<

Mandatory Documents for Submission

Mandatory Documents for Submission: Select the form and click the 'Open Form' button.

Optional Documents

PHS 398 Cover Letter File

PHS 398 Modular Budget

Move Form to Submission List =>

Optional Documents for Submission

Open Form

Start | GroupWise Mes... | Novell GroupWi... | http://hsc-info... | 99.5 Magic FM ... | http://gateway... | http://apply0... | Microsoft Power... | Search Desktop | Links >> | 10:04 AM Friday

PI must move to the right, open and complete all forms indicated under “Mandatory Documents”. For “Optional Document” guidance, refer to Program Instructions.

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf - Microsoft Internet Explorer provided

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf

http://apply07.grants.gov/apply/opportunities/packa...

Please fill out the following form. Highlight Fields

Save & Submit Save Print Cancel Check Package for Errors

GRANTS.GOV™

Grant Application Package

Opportunity Title: Research Project Grant (Parent R01)

Offering Agency: National Institutes of Health

CFDA Number:

CFDA Description:

Opportunity Number: PA-07-070

Competition ID: ADOBE-FORMS-A

Opportunity Open Date: 12/05/2008

Opportunity Close Date: 01/07/2010

Agency Contact: Grants Info
TTY: 301-451-0088
E-mail: GrantsInfo@nih.gov
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This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name: [Redacted]

Mandatory Documents

- SF424 (R & R)
- Research & Related Senior/Key Person Profile (E)
- Research & Related Other Project Information
- Research & Related Project/Performance Site Loc
- PHS 398 Cover Page Supplement
- PHS 398 Research Plan
- PHS 398 Checklist

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

Open Form

Optional Documents

- PHS 398 Cover Letter File
- PHS 398 Modular Budget

Move Form to Submission List

Optional Documents for Submission

Start | GroupWise ... | Novell Group... | http://hsc-in... | 99.5 Magic F... | http://gate... | http://appl... | NIH Info | Microsoft Po... | Search Desktop | Links >> | 9:58 AM Friday

Once moved to the right side and opened, forms stay opened to build the package. They can be edited and scrolled from form to form. Optional forms incorrectly added can be withdrawn by moving them back to the left, but if re-added by moving right again, they will re-order themselves.

The screenshot shows the Grants.gov application interface. At the top, there are navigation buttons: **Save & Submit**, **Save**, **Print**, **Cancel**, and **Check Package for Errors**. The main form contains the following information:

- Opportunity Title:** Research Project Grant (Parent R01)
- Offering Agency:** National Institutes of Health
- CFDA Number:** [Empty field]
- CFDA Description:** [Empty field]
- Opportunity Number:** PA-07-070
- Competition ID:** ADOBE-FORMS-A
- Opportunity Open Date:** 12/05/2008
- Opportunity Close Date:** 01/07/2010
- Agency Contact:** Grants Info, TTY 301-451-0088, E-mail: GrantsInfo@nih.gov, Phone: 301-435-0714

A blue box on the right contains the following text:

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

Below the form, a yellow box highlights the text: *** Application Filing Name:** [Redacted]

The interface is divided into two main sections for document management:

- Mandatory Documents:** A list of required documents with a "Move Form to Complete" button (=>) and a "Move Form to Delete" button (<=).
- Optional Documents:** A list of optional documents with a "Move Form to Submission List" button (=>).

Both sections have "Mandatory Documents for Submission" and "Optional Documents for Submission" lists. A red circle highlights the "Move Form to Submission List" button in the Optional Documents section. A red arrow points from the top right of the screen down to this button.

The bottom of the screen shows the Windows taskbar with the Start button, several open applications (GroupWise Messenger, Novell GroupWise - Mailbox, Internet Explorer, Microsoft PowerPoint), and the system tray showing the time as 1:33 PM on Friday.

HSC Deadline Policy for NIH Electronic Submissions ONLY

10-Day

- PI submits required PDS, COI and other forms as necessary. PI must print technical file and FOA and include in paper package to PreAward. Submit electronic file with draft Research Plan via email to HSC-PreAward@salud.unm.edu. All Institutional information, budgets and budget justification must be final – this includes your subawardee budget information as well.
- PreAward logs project into PreAward database for tracking and reviews as normal.
- PreAward makes comments to PI/contact point person if questions or errors detected.

5-Day

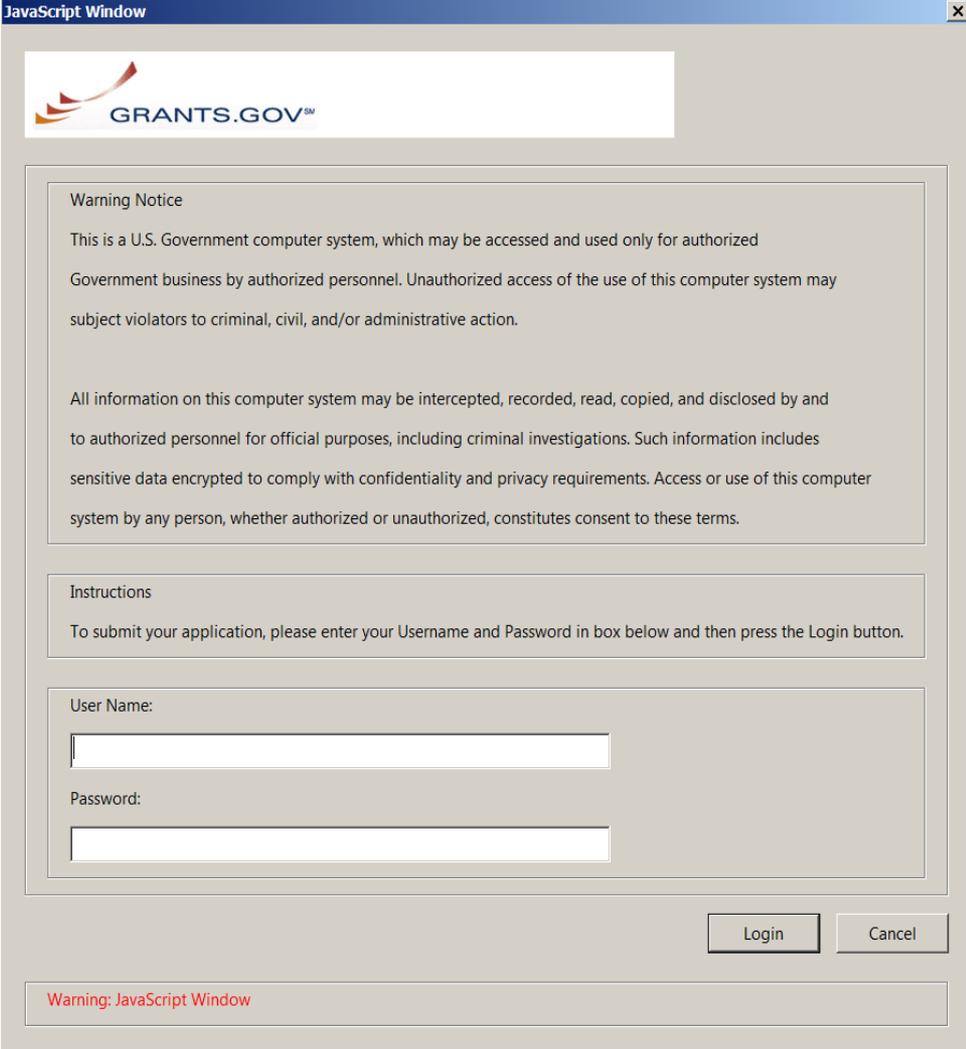
- PI emails PreAward FINAL electronic proposal package to the HSC general mailbox.
- If errors or questions, PI and/or contact point on PDS are e-mailed (or telephoned) with concerns.
- If no questions or concerns, PreAward submits application through Grants.gov.
- Between 2 hours & 2 days, Grants.gov formats the application and sends an e-mail indicating there are errors or that processing has occurred.
- If errors found at NIH, PI corrects and e-mails back to PreAward; process begins again.

PreAward Personnel Receives Initial Electronic Package

- The electronic proposal package is one large unit with many subcomponents.
- PreAward person will open and review every mandatory form completed by the PI. Science portion will only be reviewed for page limitation and format compliance. If something is missing or incorrect, the PreAward person will notify the PI to make the correction and re-email corrected package again.
- PreAward will focus on the correct institutional information, such as correct DUNS Number and Credentials (eRA Commons Username). This information is critical in relating the application to this institution, as well as, applying it to the correct PI.

After PreAward Review

- PI will email FINAL package with completed Research Plan to PreAward with all their forms moved over to “Mandatory Documents Completed” **5 business days** prior to submit date.
- PreAward will then “Check the Page for Errors” and press the Submit Button if everything is a go.



The screenshot shows a web browser window titled "JavaScript Window" displaying the GRANTS.GOV login page. The page features the GRANTS.GOV logo at the top. Below the logo is a "Warning Notice" section with the following text: "This is a U.S. Government computer system, which may be accessed and used only for authorized Government business by authorized personnel. Unauthorized access of the use of this computer system may subject violators to criminal, civil, and/or administrative action." Below the warning notice is an "Instructions" section with the text: "To submit your application, please enter your Username and Password in box below and then press the Login button." The login form consists of two input fields: "User Name:" and "Password:". At the bottom right of the form are two buttons: "Login" and "Cancel". A warning message "Warning: JavaScript Window" is visible at the bottom of the browser window.

Application Submission Verification and Signature

Opportunity Title: SBIR (R43/R44) System-to-System Program Announcement
Offering Agency: National Institutes of Health Stage
CFDA Number:
CFDA Description:
Opportunity Number: PA-SS-SBR
Competition ID:
Opportunity Open Date: 03/01/2006
Opportunity Close Date: 12/31/2007
Application Filing Name : Dominant expression sample

Do you wish to sign and submit this Application?

Please review the summary provided to ensure that the information listed is correct and that you are submitting an application to the opportunity for which you want to apply.

If you want to submit the application package for the listed funding opportunity, click on the "Sign and Submit Application" button below to complete the process. You will then see a screen prompting you to enter your user ID and password.

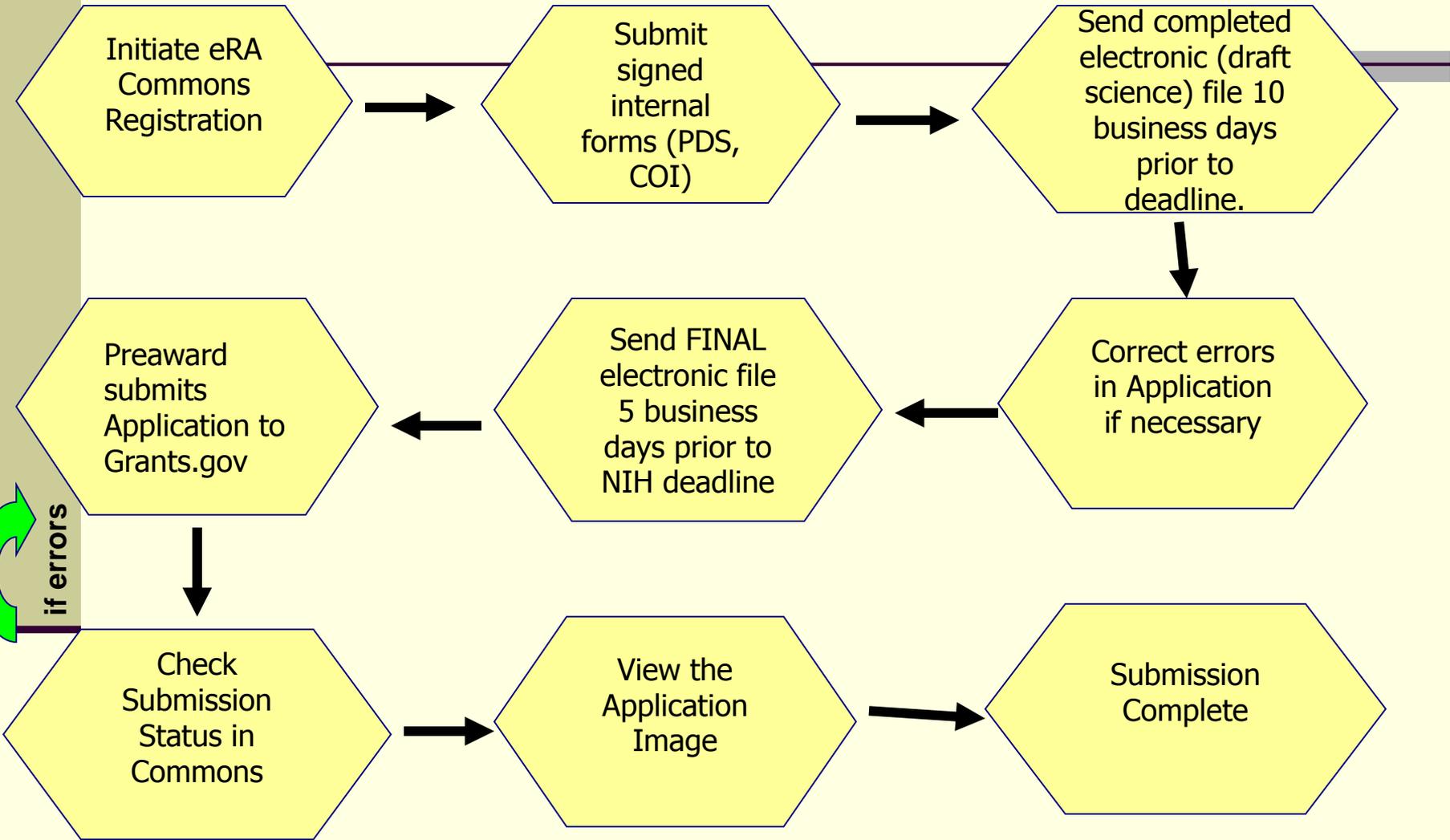
If you do not want to submit the application at this time, click the "Exit Application" button. You will then be returned to the previous page where you can make changes to the required forms and documents or exit the process.

If this is not the application for the funding opportunity for which you wish to apply, you must exit this application package and then download and complete the correct application package.

Sign and Submit Application

Exit Application

Internal Submission Process



After Submission What Next?

- PreAward receives four e-mail confirmations from Grants.Gov. (Can take up to 48 hours to complete.)
- The eRA Commons software checks the applications against NIH Business Rules – the complete list of validation checks can be reviewed in detail at http://era.nih.gov/ElectronicReceipt/prepare_app.htm#5.
- The final confirmation from Grants.gov tells us that the application has been received by NIH.
- The last (5th) e-mail notice will come from eRA Commons to both SO and PI; either “Validations Complete-Check Assembled Package” or “Action Required to Continue...”

When Application is Received by NIH

- PI and PreAward official log in to eRA Commons and review assembled application and list of any warnings and/or errors.
- 2 Business days to review: if acceptable, no action needed, if unacceptable, PreAward rejects application.
- If rejected, PI corrects errors and submission process starts again.
- **IMPORTANT: As of January 25, 2011, post due date correction of errors or warnings resulting from applicant error will render the submission officially late. Such submissions will either be rejected by the portal if the opportunity has closed, or will simply not be reviewed.**

Avoiding Common Causes for Rejected Applications

- **File and/or attachments must be in proper PDF format**

Other formats may be allowed through Grants.gov but are not accepted by NIH. Make sure you have a compatible version of Adobe (8.3 or later).

- **Special characters not allowed in file names**

For instance, brackets such as "[" and "]" are not accepted. Avoid blank spaces in file names.

- **Signature must be turned “off”**

When using Adobe Acrobat, the signature has to be “off” when you create the originals. Go to the security options menu selection in Adobe to ensure the signature is off. If you do not have the originals, copy the content of the signed documents and create a new document. Save this document without signing it.

- **Do not submit protected PDF documents**

Make sure security settings are not marked. Check Document Security tab under Document Properties (directly from the tab) and set the security parameters to ensure open access so NIH can process the content. Do not password protect or mark Content Extraction or Copying; Document Assembly, etc. as “Not Allowed.”

NOTE: If you are having trouble fixing the PDF settings, simply cut and paste from the PDF document into a Microsoft Word document and then reconvert (in some cases it may be better to use another PDF converter).

More Common Causes for Rejected Applications

- **PDF documents must not be saved with editable fields**

Do not save PDF files with fields that can be changed. If for example, you are using Adobe, use your PDF printer tool (Go to File and click on Print and select the output device for printing to Adobe PDF) to create an Adobe PDF print version file. Send the Adobe PDF print version file, not the original editable version. If you do not have a PDF print tool, click on the link below to see a recommended list of tools:

<http://www.grants.gov/assets/PDFConversion.pdf>

- **BE SURE TO USE NEW DUNS NUMBER: 829868723.**

- **Must have correct Commons User ID:**

The application must include the PI's Commons User ID in the field called "Credential, e.g. agency login."

This field is not marked as required on the government-wide form but is required by NIH.

- See full list of most common errors in NIH Handout.

NOTE: Applicants have to read the agency specific instruction in the application guide to know what to include in this field.

eRA Commons Status Page

Commons Status Query - Status Result - Recent/Pending eSubmissions Search - Windows Internet Explorer

https://commons.era.nih.gov/commons/status/eSubmissionsSearchResult.jsp

File Edit View Favorites Tools Help

Links Customize Links Banner Log-in InfoEd Log-in Learning Central_Login MyUNM Preaward Home Help Desk HSLIC Windows

Commons Status Query - Status Result - Recent/...

Electronic Research Administration
eRA Commons
 Sponsored by National Institutes of Health
 Version 2.21.1.14

Welcome rfbofman
 Institution: UNIVERSITY OF NEW MEXICO HEALTH SCIS CTR
 Authority: AA SO [Log-out](#)

Home Admin Institution Profile Personal Profile **Status** eSNAP xTrain Links eRA Partners Help

Status Result - Recent/Pending eSubmissions Search

1 - 16 of 16

Application ID	Grants.gov Tracking #	eSubmission Status	Proposal Title	PI Name	eSubmission Status Date	Show All Prior Errors	Action
	GRANT10270039	eSubmission Error			5/4/2009 13:58:13	Show All Prior Errors	
AN:3179486	GRANT10298048	Pending Verification			5/3/2009 13:26:20	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3178284	GRANT10294511	Pending Verification			5/2/2009 10:28:43	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3178012	GRANT10293660	Pending Verification			5/2/2009 7:7:45	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3174979	GRANT10281580	Pending Verification			5/1/2009 23:49:45	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3174927	GRANT10281477	Pending Verification			5/1/2009 23:29:19	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3174900	GRANT10281386	Pending Verification			5/1/2009 23:17:54	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3174809	GRANT10281199	Pending Verification			5/1/2009 22:50:55	Show All Prior Errors	Transmittal Sheet Reject eApplication
	GRANT10282402	eSubmission Error			5/1/2009 21:51:50	Show All Prior Errors	
AN:3174049	GRANT10278779	Pending Verification			5/1/2009 19:0:53	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3173708	GRANT10277252	Pending Verification			5/1/2009 18:0:5	Show All Prior Errors	Transmittal Sheet Reject eApplication
	GRANT10277552	eSubmission Error			5/1/2009 16:35:8	Show All Prior Errors	
AN:3173208	GRANT10296543	Pending Verification			5/1/2009 13:22:57	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3173154	GRANT10277376	Pending Verification			5/1/2009 11:38:5	Show All Prior Errors	Transmittal Sheet Reject eApplication
AN:3171841	GRANT10274496	Pending Verification			4/30/2009 1:17:28	Show All Prior Errors	Transmittal Sheet Reject eApplication
	GRANT10267482	eSubmission Error			4/26/2009 12:52:29	Show All Prior Errors	

Export to Excel Show Query Print Hitlist

[[Contact Us/Help Desk](#) | [Privacy Notice](#) | [Disclaimer](#) | [Accessibility](#)]

 National Institutes of Health (NIH)
 9000 Rockville Pike
 Bethesda, Maryland 20892
  Department of Health and Human Services

 © 2009 NIH. All Rights Reserved.
 Screen Rendered: 05/04/2009 05:27:04 EDT
 Screen Id: STA4054
  GRANTS.GOV™
 FIND. APPLY. SUCCEED.™

Done Internet | Protected Mode: Off 100%

Novell GroupWise - ... NIH Training Materi... Sample Grant Appli... Microsoft PowerPoi... Commons Status Q...

3:28 PM

Errors/Warnings for Prior Failed eSubmissions

GRANT11093958 2012-03-23

WARNING The human subject assurance number entered in the Other Project Information component does not match what is in the eRA Commons profile for your organization. There are rare cases where this is permissible. Please make sure that the correct number is entered on the Other Project Information page. If not, correct and resubmit. Note, if you do not have an approved assurance on file with OHRP and have inserted "None" in the Human Subject Assurance Number, no correction is necessary. (3.5.1)

GRANT11093875 2012-03-23

ERROR The organization name for Key Person Vince Calhoun must be provided on the Senior/Key Person page. (4.8.1)

WARNING The human subject assurance number entered in the Other Project Information component does not match what is in the eRA Commons profile for your organization. There are rare cases where this is permissible. Please make sure that the correct number is entered on the Other Project Information page. If not, correct and resubmit. Note, if you do not have an approved assurance on file with OHRP and have inserted "None" in the Human Subject Assurance Number, no correction is necessary. (3.5.1)

[Close](#)

Complete Submission

Status Information - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://commons.era.nih.gov/commons/status/genericStatusInformation.jsp> Go

Back Forward Stop Home Favorites Refresh Failed to retrieve buttons from MyWebSearch. Retry

Adobe Y! Search Web Upgrade Now! Mail

General Grant Information

Status: Scientific Review Group review pending.
Institution Name: UNIVERSITY OF NEW MEXICO
School Name:
School Category:
Division Name:
Department Name:
PI Name: [REDACTED]
Grant #: [REDACTED]
Proposal Title: [REDACTED]
Proposal Receipt Date: 08/07/2006
Last Status Update Date: 08/13/2006
Current Award Notice Date:
Application Source: Grants.gov
Project Period Begin Date: 08/01/2007
Project Period End Date: 07/31/2010
eApplication Status: Submission Complete

Other Relevant Documents

- [e-Application](#)
- [Appendix](#)
- [Appendix 2](#)
- [Appendix 3](#)
- [Appendix 4](#)
- [Appendix 5](#)
- [eSubmission Cover Letter](#)

Status History		Institute or Center Assignment	
Effective Date	Status Message	Institute or Center	Assignment Date
08/13/2006	Scientific Review Group review pending.	NATIONAL INSTITUTE OF DENTAL & CRANIOFACIAL RESEARCH (Primary)	08/11/2006
08/07/2006	Application entered into system		

Application Information		Study Section		Advisory Council(AC) Information	
Award Document Number:	RDE018272A	Scientific Review Group:	ZDE1 SK (21)		
FSR Accepted Code:	N	Council Meeting Date(YYYYMM):	200701		
Snap Indicator Code:					

Contacts			
Administration	Name	Phone	Email
Grants Management Specialist(GMS)	Pham, Helen	301-594-7704	phamh@mail.nih.gov
Program Official(PO)	Hunziker, Rosemarie	301-451-3888	hunzikerr@nidcr.nih.gov

[Back](#)

Start O:\DA... Micros... Statu... 8:09 AM

Preparation Checklist

- Ensure PI has NIH E-Commons user ID, remembers password & has filled in all personal info.
- Ensure the correct DUNS number for UNM HSC is entered on page one of the SF424: **829868723**.
- Remind your PreAward person to make sure that the PI has been affiliated with our new HSC DUNS number. (Especially important if PI does not submit a lot of grant applications.)
- Ensure PI has PDF Software and is trained in use. Adobe Reader 8.3 or later is needed to complete/convert forms.
- Ensure PI Always Reads Application
- Ensure PI attends or has their staff attend the HSC training or goes online to <http://era.nih.gov/ElectronicReceipt/training.htm> and practices the demo application.
- Ensure HSC timelines are followed.

E-Commons – Fill in all Personal Info After Registered

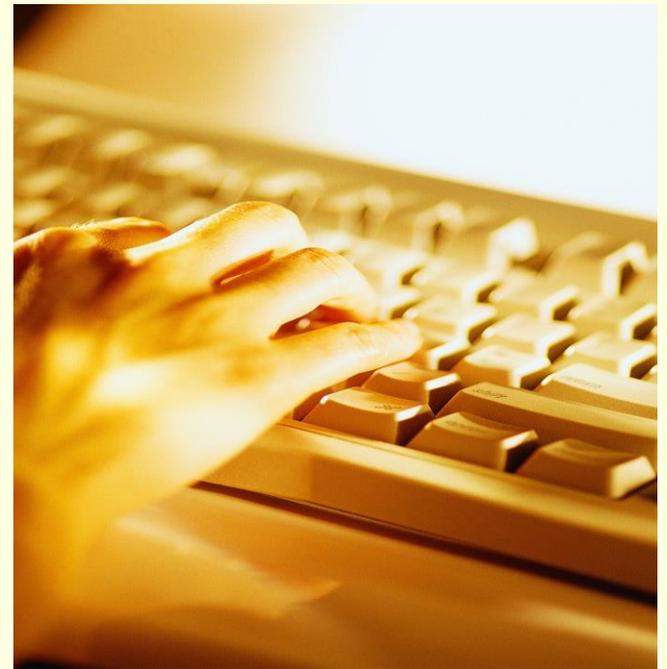
Step through and fill out

The screenshot shows a web browser window titled "Personal Information - Microsoft Internet Explorer". The address bar shows the URL: <https://commons.era.nih.gov/commons/profile/personalInfo.jsp>. The page header includes the National Institutes of Health logo and the text "NATIONAL INSTITUTES OF HEALTH eRA Commons". A navigation menu includes links for Home, Admin, Institution Profile, Personal Profile, Status, eSNAP, Links, and Help. The "Personal Information" section is active, showing a form with the following fields:

- Identifying Information:**
 - Name Prefix:
 - Middle Name:
 - Name Suffix:
 - Gender:
 - U.S. Citizenship:
 - eRA Email:
 - First Name: *
 - Last Name: *
 - SSN:
 - DOB: * Withheld?
 - Citizenship Country:
 - System Notifications: *
- Disabilities (select all that apply):**
 - Hearing
 - Missing Extremities
 - Partial Paralysis
 - Speech
 - Other
 - Vision
 - Nonparalytic Orthopedic
 - Complete paralysis
 - Motor (temp code)

At the bottom of the form are buttons for "Submit", "Reset", and "Cancel". The Windows taskbar at the bottom shows the start button, several application icons, and the system tray with the time 8:16 AM.

■ Now Let's
Complete the
Application!



Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

Highlight Fields

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name:

Mandatory Documents

- PHS 398 Research Plan
- PHS 398 Checklist
- PHS 398 Cover Page Supplement
- Research And Related Senior/Key Person Profile
- Research And Related Other Project Information
- Project/Performance Site Location(s)

Move Form to Complete



Move Form to Delete



Mandatory Documents for Submission

- SF424 (R & R)

[Open Form](#)

Optional Documents

- PHS Cover Letter
- PHS 398 Modular Budget
- Research & Related Budget
- R & R Subaward Budget Attachment(s) Form

Move Form to Submission List



Move Form to Delete



Optional Documents for Submission

[Open Form](#)

Instructions

- 1** Enter a name for the application in the Application Filing Name field.
 - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
 - You can save your application at any time by clicking the "Save" button at the top of your screen.
 - The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.
- 2** Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.
 - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.

Completing the SF424 (R&R)

Consolidates forms used by Federal grant making agencies so applicants can use familiar forms regardless of the program or agency.

- FOA will indicate which components are required, and which are optional.
- Not all components will be used for FOA.
- You have to complete a **new** SF424 for each project, and you may not use *ANY* sample form package.

File Edit View Document Comments Forms Tools Advanced Window Help

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

OMB Number: 4040-0001
Expiration Date: 06/30/2011

View Burden Statement

**APPLICATION FOR FEDERAL ASSISTANCE
SF 424 (R&R)**

3. DATE RECEIVED BY STATE: _____ State Application Identifier: _____

1. * TYPE OF SUBMISSION
 Pre-application Application Changed/Corrected Application

4. a. Federal Identifier: _____
 b. Agency Routing Identifier: _____

2. DATE SUBMITTED: _____ Applicant Identifier: HSC-15000

5. APPLICANT INFORMATION * Organizational DUNS: 829868723

* Legal Name: University of New Mexico Health Sciences Center
 Department: PreAward Services, HSC Division: Financial Services
 * Street1: MSC09 5220
 Street2: 1 University of New Mexico
 * City: Albuquerque County / Parish: Bernalillo
 * State: NM: New Mexico Province: _____
 * Country: USA: UNITED STATES * ZIP / Postal Code: 87131-0001

Person to be contacted on matters involving this application
 Prefix: _____ * First Name: Rena Middle Name: _____
 * Last Name: Vinyard Suffix: _____
 * Phone Number: 505-272-6264 Fax Number: 505-272-0159
 Email: HSC-Preaward@salud.unm.edu

6. * EMPLOYER IDENTIFICATION (EIN) or (TIN): 85-6000642

7. * TYPE OF APPLICANT: _____ H: Public/State Controlled Institution of Higher Edu

For multi-PI projects
Lead PI info
goes here

SF424 (R&R) Cover Component Page 1

- Provides general information about the applicant organization and contact information for the **PD/PI** and **AO (PreAward)**
- Applicant identifier is PDS number assigned by PreAward
- Federal Identifier in field 4 is only for corrected applications, renewals or other submissions that have had previously assigned grant numbers. (8 character limit; i.e. CA123456)

File Edit View Document Comments Forms Tools Advanced Window Help

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

New Resubmission A. Increase Award B. Decrease Award C. Increase
 Renewal Continuation Revision E. Other (specify): _____

* Is this application being submitted to other agencies? Yes No What other Agencies? _____

9. * NAME OF FEDERAL AGENCY: National Institutes of Health

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: _____ TITLE: _____

11. * DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Effects of Emerging Cellular Technologies on Cancer Health Care

12. PROPOSED PROJECT: * Start Date: 03/01/2011 * Ending Date: 02/28/2013

* 13. CONGRESSIONAL DISTRICT OF APPLICANT: NM-001

14. PROJECT DIRECTOR/PRINCIPAL INVESTIGATOR CONTACT INFORMATION
 Prefix: Dr. * First Name: Bunny Middle Name: _____
 * Last Name: Flower Suffix: Ph.D.
 Position/Title: _____
 * Organization Name: University of New Mexico Health Sciences Center
 Department: Pediatrics Division: School of Medicine
 * Street1: MSC10 5590
 Street2: 1 University of New Mexico
 * City: Albuquerque County / Parish: Bernalillo
 * State: NM: New Mexico Province: _____
 * Country: USA: UNITED STATES * ZIP / Postal Code: 87131-0001
 * Phone Number: 505-222-2222 Fax Number: 505-222-3333

SF424 (R&R) - *Cover Component*

Avoiding Errors - A Few Data Issues

Non-Competing Continuations are processed through eRA Commons

Item 8, Type of Application--New Terminology

- **New:** A new application is expected to be substantially different in content and scope with more significant differences than are seen in a resubmitted application
- **Resubmission** is what we would normally consider a revision: a revised or amended application. (The term Revision is used differently by NIH—see below.) Only one resubmission is now allowed. PI's filing new submissions will be allowed the opportunity to make one major correction to their initial submission.
- **Renewal** is equivalent to a Competing Continuation
- **Continuation** is for non-competing continuations for only select agencies. It is equivalent to a Progress Report, so for the purposes of NIH and other PHS agencies, the box for Continuation will **not** be used and should **not** be checked. The eSNAP utility will be used for non-competing continuations.
- **Revision** is equivalent to a Competing Supplement (after initial award, it's used to request additional support for current period)
- **Preapplication** Do not use unless specifically instructed

SF424 (R&R) - *Cover Component*

Avoiding Errors – More Data Issues

- **Item 5, Organizational DUNS:** *Must match DUNS in eRA Commons profile for Applicant Institution; again that number is 829868723*
- **Item 13, Congressional District:** *Should be listed in Alpha-numeric form with 2-letter State designation, a dash, and 3-digit district number; i.e.: **NM-001**, or **NM-003**, or NM-all*
- **Division** *means largest major sub-division, i.e.; School of Medicine, College of Pharmacy, College of Nursing.*
- **Department** *means main area of PI primary appointment, i.e.; Pathology, Pediatrics, etc.*

SF 424 (R&R) Cover Component Page 2

The screenshot shows a PDF form titled "SF 424 (R&R) Cover Component Page 2" in Adobe Acrobat Professional. The form is divided into several sections:

- 15. ESTIMATED PROJECT FUNDING**
 - a. Total Federal Funds Requested: 565,458.00
 - b. Total Non-Federal Funds: 0.00
 - c. Total Federal & Non-Federal Funds: 565,458.00
 - d. Estimated Program Income: 0.00
- 16. * IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?**
 - a. YES THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:
DATE: _____
 - b. NO PROGRAM IS NOT COVERED BY E.O. 12372; OR
 PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
- 17. By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances * and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**
 - * I agree
 - * The list of certifications and assurances, or an Internet site where you may obtain this list, is contained in the announcement or agency specific instructions.
- 18. SFLLL or other Explanatory Documentation**
 - _____
- 19. Authorized Representative**
 - Prefix: _____ * First Name: Your PreAward Person Middle Name: _____
 - * Last Name: Your PreAward Person Suffix: _____
 - * Position/Title: Contract & Grant Administrator
 - * Organization: University of New Mexico Health Sciences Center
 - Department: PreAward Services, HSC Division: Financial Services
 - * Street1: MSC09 5220
 - Street2: _____

Note: Use the general PreAward telephone and fax numbers for your CGA's contact info, however, put their actual e-mail in the designated e-mail field. (This ensures all stakeholders receive necessary notifications.)

Disregard box #18. Does not apply to us.

Research and Related Project/Performance Site Locations

- Captures structured data for up to 29 additional locations
- Form will add a new block for each additional site. If an extra site block is added by mistake, use “Delete Entry” key.
- **Be sure to add any Subaward locations here.**
- Ignore checkbox at top of each block. (Does not apply to us.)
- Note that entry of Congressional Districts of actual project site locations has been relocated to this form.
- >30 locations – information is provided in an attachment (*not structured data, just text*) and uploaded in the Additional Locations field
- Format for >30 available on SF424 (R&R) Forms Page:
<http://grants.nih.gov/grants/funding/424/index.htm>

Project/Performance Site Location(s)

NIH Live Sample ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

Project/Performance Site Location(s) Expiration Date: 08/31/2011

I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Project/Performance Site Primary Location

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 1

I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Delete Entry Next Site

Novell GroupWise... Mail From: Hugh ... http://hsc-infoed... NIH Training Mat... A PreAward Resou... Microsoft PowerP... NIH_Live Sample... SF424R-R_biosket... 2:41 PM

Component: *Research and Related Other Project Information*

- **Major Change:** Human Subjects number is now numeric only and requires 8 digits. The Human Subjects Assurance number should be entered in the following format: **00003255**.
- Animal Welfare Assurance number is entered as A3350-01.
- Form Includes separate PDF attachments for
 - Project Summary/Abstract (Brief description/overview)
 - Project Narrative
 - *Detail about how project will contribute to the Public Health. NIH will use this upload for the “Relevance” section of the Abstract*
 - *Separate component developed for Research Plan*
 - Bibliography & References
 - **Note:** As of April 2008, NIH’s Public Access Policy became effective, which mandates that all publications of NIH funded research be posted in Pub Med (see hand-out for proper format of citations)
 - Facilities & Other Resources: Describes project venue.
 - Equipment: This is for major items of equipment already available for use. List location and importance to project.

Research and Related Other Project Information

NIH_Live_Sample_ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

File Edit View Document Comments Forms Tools Advanced Window Help

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

RESEARCH & RELATED Other Project Information

1. * Are Human Subjects Involved? Yes No

1.a. If YES to Human Subjects

Is the Project Exempt from Federal regulations? Yes No

If yes, check appropriate exemption number. 1 2 3 4 5 6

If no, is the IRB review Pending? Yes No

IRB Approval Date:

Human Subject Assurance Number:

2. * Are Vertebrate Animals Used? Yes No

2.a. If YES to Vertebrate Animals

Is the IACUC review Pending? Yes No

IACUC Approval Date:

Animal Welfare Assurance Number

3. * Is proprietary/privileged information included in the application? Yes No

4.a. * Does this project have an actual or potential impact on the environment? Yes No

4.b. If yes, please explain:

4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? Yes No

4.d. If yes, please explain:

5. * Is the research performance site designated, or eligible to be designated, as a historic place? Yes No

5.a. If yes, please explain:

6. * Does this project involve activities outside of the United States or partnerships with international collaborators? Yes No

6.a. If yes, identify countries:

6.b. Optional Explanation:

7. * Project Summary/Abstract

8. * Project Narrative

9. Bibliography & References Cited

10. Facilities & Other Resources

Novell GroupWise... Mail From: Hugh... http://hsc-infoed... NIH Training Mat... A PreAward Resou... Microsoft PowerP... NIH_Live_Sample... SF424R-R_biosket... 3:03 PM

Component: Research & Related Senior Key Persons - Data Issues

- Degree type and year fields have been added to each Senior Key Person block. (Be sure PI has their profile up to date so that application information matches profile.)
- All Senior Key Persons with terminal degrees or titles of Post Doc or higher must have a Commons ID.
- Be sure to save file after every few entries as form can “lose” data if too many are added before saving.
- If an additional block is added in error, you must complete fields (with at least “dummy” information) in order to activate the “Delete Entry” button to delete.
- Make sure all biosketches are in current NIH format.
- Make sure to enter Key Persons of Subawardees.

NIH Live Sample_ADOBE-FORMS-8.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

RESEARCH & RELATED Senior/Key Person Profile (Expanded)

PROFILE - Project Director/Principal Investigator

Prefix: Dr. * First Name: Sunny Middle Name:

* Last Name: Flower Suffix: Ph.D.

Position/Title: Division Chief Department: Pediatrics

Organization Name: University of New Mexico Health Sciences Center Division: School of Medicine

* Street1: MC10 5590

Street2: University of New Mexico

* City: Albuquerque County/ Parish: Bernalillo

* State: NM: New Mexico Province:

* Country: USA: UNITED STATES * Zip / Postal Code: 87131-0001

* Phone Number: 505-222-2022 Fax Number: 505-222-3333

* E-Mail: bflower@salud.unm.edu

Credential, e.g., agency login: bflower

* Project Role: PD/PI Other Project Role Category:

Degree Type: Ph.D.

Degree Year: 1975

* Attach Biographical Sketch

Attach Current & Pending Support

PROFILE - Senior/Key Person 1

Prefix: * First Name: Middle Name:

* Last Name: Suffix:

Position/Title: Department:

Organization Name: Division:

* Street1:

Street2:

* City: County/ Parish:

* State: Province:

* Country: USA: UNITED STATES * Zip / Postal Code:

* Phone Number: Fax Number:

* E-Mail:

Credential, e.g., agency login:

* Project Role: Other Project Role Category:

Degree Type:

Degree Year:

* Attach Biographical Sketch

Attach Current & Pending Support

Senior Key Persons Profile

- Contains upload fields
- Requires Commons ID for PI's and Post Docs
- Requires Project Role for each key person
- Degree Type and Degree Year must match profiles

Enter PI
eRA
Commons
User Name

NIH Live Sample_ADOBE-FORMS-8.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

Degree Type: Ph.D.

Degree Year: 1975

* Attach Biographical Sketch

Attach Current & Pending Support

PROFILE - Senior/Key Person 1

Prefix: * First Name: Middle Name:

* Last Name: Suffix:

Position/Title: Department:

Organization Name: Division:

* Street1:

Street2:

* City: County/ Parish:

* State: Province:

* Country: USA: UNITED STATES * Zip / Postal Code:

* Phone Number: Fax Number:

* E-Mail:

Credential, e.g., agency login:

* Project Role: Other Project Role Category:

Degree Type:

Degree Year:

* Attach Biographical Sketch

Attach Current & Pending Support

To ensure proper performance of this form, after adding 20 additional Senior/Key Persons, please save your application, close the Adobe Reader, and reopen it.

Refer to SF424 current instructions for how to complete Biosketch form.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/Key personnel and other significant contributors.

NAME Hunt, Virginia Lively	POSITION TITLE Associate Professor of Psychology
ORCID COMMONS USER NAME (credential, e.g., agency/login) huntvl	

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing; include postdoctoral training and residency training if applicable.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	MMYY	FIELD OF STUDY
University of California, Berkeley	B.S.	05/90	Psychology
University of Vermont	Ph.D.	05/96	Experimental Psychology
University of California, Berkeley	Postdoctoral	08/98	Public Health and Epidemiology

A. Personal Statement

The goal of the proposed research is to investigate the interaction between drug abuse and normal aging processes. Specifically, we plan to measure changes in cognitive ability and mental and physical health across a five-year period in a group of older drug users and matched controls. I have the expertise, leadership and motivation necessary to successfully carry out the proposed work. I have a broad background in psychology, with specific training and expertise in key research areas for this application. As a postdoctoral fellow at Berkeley, I carried out ethnographic and survey research and secondary data analysis on psychological aspects of drug addiction. At the Division of Intramural Research at the National Institute on Drug Abuse (NIDA), I expanded my research to include neuropsychological changes associated with addiction. As PI or co-Investigator on several previous university- and NIH-funded grants, I laid the groundwork for the proposed research by developing effective measures of disability, depression, and other psychosocial factors relevant to the aging substance abuser, and by establishing strong ties with community providers that will make it possible to recruit and track participants over time. In addition, I successfully administered the projects (e.g. staffing, research protections, budget), collaborated with other researchers, and produced several peer-reviewed publications from each project. As a result of these previous experiences, I am aware of the importance of frequent communication among project members and of constructing a realistic research plan, timeline, and budget. The current application builds logically on my prior work, and I have chosen co-investigators (Dr. Gryczynski and Newlin) who provide additional expertise in cognition, gerontology and genetics. In summary, I have a demonstrated record of successful and productive research projects in an area of high relevance for our aging population, and my expertise and experience have prepared me to lead the proposed project.

B. Positions and Honors

Positions and Employment

1998-2000	Fellow, Division of Intramural Research, National Institute of Drug Abuse, Bethesda, MD
2000-2002	Lecturer, Department of Psychology, Middlebury College, Middlebury, VT
2001-	Consultant, Coastal Psychological Services, San Francisco, CA
2002-2005	Assistant Professor, Department of Psychology, Washington University, St. Louis, MO
2005-	Associate Professor, Department of Psychology, Washington University, St. Louis, MO

Personal statement now required. Publications are limited to 15: those that are directly relevant to the proposal. The four-page overall limit remains the same. May now add a statement describing factors that may have reduced productivity.

Biosketch Sample, Page 2

Table Tools SF424R-R_biosketchsample_VerB.doc (Read-Only) [Compatibility Mode] - Microsoft Word

Home Insert Page Layout References Mailings Review View Acrobat Design Layout

1 2 3 4 5 6 7

Other Experience and Professional Memberships

1995-	Member, American Psychological Association
1998-	Member, Gerontological Society of America
1998-	Member, American Geriatrics Society
2000-	Associate Editor, Psychology and Aging
2003-	Board of Advisors, Senior Services of Eastern Missouri
2003-04	NIH Peer Review Committee, Psychobiology of Aging, ad hoc reviewer
2005-09	NIH Risk, Adult Addictions Study Section, member

Honors

2003	Outstanding Young Faculty Award, Washington University, St. Louis, MO
2005	Excellence in Teaching, Washington University, St. Louis, MO
2008	Award for Best in Interdisciplinary Ethnography, International Ethnographic Society

C. Selected Peer-reviewed Publications (Selected from 42 peer-reviewed publications)

Most relevant to the current application

- Merryle, R.J. & Hunt, V.L. (2004). Independent living, physical disability and substance abuse among the elderly. *Psychology and Aging*, 23(4), 10-22.
- Hunt, V.L., Jensen, J.L. & Crenshaw, W. (2007). Substance abuse and mental health among community-dwelling elderly. *International Journal of Geriatric Psychiatry*, 24(9), 1124-1135.
- Hunt, V.L., Wechelt, S.A. & Merryle, R. (2008). Predicting the substance-abuse treatment needs of an aging population. *American Journal of Public Health*, 45(2), 236-245. PMID: PMC9162292
- Hunt, V.L., Newlin, D.B. & Fishbein, D. (2009). Brain imaging in methamphetamine abusers across the life-span. *Gerontology*, 46(3), 122-145.
- Hunt, V.L. & Sher, K.A. (2009). Successful intervention models for older drug-abusers: Research across the life-span. *American Psychologist*, in press. NIHMSID: NIHMS99135

Additional recent publications of importance to the field (in chronological order)

- Gryczynski, J., Shaft, B.M., Merryle, R., & Hunt, V.L. (2002). Community based participatory research with late-life addicts. *American Journal of Alcohol and Drug Abuse*, 15(3), 222-238.
- Shaft, B.M., Hunt, V.L., Merryle, R., & Venturi, R. (2003). Policy implications of genetic transmission of alcohol and drug abuse in female nonusers. *International Journal of Drug Policy*, 30(5), 46-58.
- Hunt, V.L., Marks, A.E., Shaft, B.M., Merryle, R., & Jensen, J.L. (2004). Early-life family and community characteristics and late-life substance abuse. *Journal of Applied Gerontology*, 28(2), 26-37.
- Hunt, V.L., Merryle, R. & Jensen, J.L. (2005). The effect of social support networks on morbidity among elderly substance abusers. *Journal of the American Geriatrics Society*, 57(4), 15-23.
- Hunt, V.L., Pour, B., Marks, A.E., Merryle, R. & Jensen, J.L. (2005). Aging out of methadone treatment. *American Journal of Alcohol and Drug Abuse*, 15(6), 134-149.
- Hunt, V.L., Marks, A.E., Venturi, R., Crenshaw, W. & Ratonian, A. (2006). Community-based intervention strategies for reducing alcohol and drug abuse in the elderly. *Addiction*, 104(9), 1436-1606. PMID: PMC9000292
- Merryle, R. & Hunt, V.L. (2006). Randomized clinical trial of cotinine in older nicotine addicts. *Age and Ageing*, 38(2), 9-23. PMID: PMC9002364
- Hunt, V.L., Jensen, J.L. & Merryle, R. (2008). The aging addict: ethnographic profiles of the elderly drug user. NY, NY: W. W. Norton & Company.
- Hunt, V.L. (2009). Contrasting ethnicity with race in the older alcoholic. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, in press. PMID: PMC Journal - In Process.
- Hunt, V.L. (2009). Intervening successfully with the older methadone patient. *Journal of Applied Gerontology*, 13(4), 67-79.

Page: 2 of 3 Words: 1,150

Novell Grou... Mail From: ... Mail From: ... http://hsc-... SF424 (R&R)... NIH Trainin... A PreAward ... Microsoft P... NIH_Live Sa... SF424R-R_bi... 100% 3:42 PM

Biosketch Sample, Page 3

Table Tools SF424R-R_biosketchsample_VerB.doc (Read-Only) [Compatibility Mode] - Microsoft Word

Home Insert Page Layout References Mailings Review View Acrobat Design Layout

1 2 3 4 5 6 7

D. Research Support

Ongoing Research Support

R01 DA942367-03 Hunt (PI) 09/01/07-08/31/12
Health trajectories and behavioral interventions among older substance abusers
The goal of this study is to compare the effects of two substance abuse interventions on health outcomes in an urban population of older opiate addicts.
Role: PI

R01 MH922731-05 Merryle (PI) 07/15/05-06/30/10
Physical disability, depression and substance abuse in the elderly
The goal of this study is to identify disability and depression trajectories and demographic factors associated with substance abuse in an independently-living elderly population.
Role: Co-Investigator

Faculty Resources Grant, Washington University 08/15/09-08/14/11
Opiate Addiction Database
The goal of this project is to create an integrated database of demographic, social and biomedical information for homeless opiate abusers in two urban Missouri locations, using a number of state and local data sources.

Completed Research Support

K02 AG442898 Hunt (PI) 09/01/06-08/31/09
Drug Abuse in the Elderly
Independent Scientist Award: to develop a drug addiction research program with a focus on substance abuse among the elderly.
Role: PI

R21 AA998075 Hunt (PI) 01/01/04-12/31/06
Community-based intervention for alcohol abuse
The goal of this project was to assess a community-based strategy for reducing alcohol abuse among older individuals.
Role: PI

Page: 3 of 3 Words: 1,150

Novell Grou... Mail From: ... Mail From: ... http://hsc-i... SF424 (R&R)... NIH Trainin... A PreAward ... Microsoft P... NIH_Live Sa... SF424R-R_bi... 100% 3:45 PM

Data Issues: *Research and Related Senior/Key Persons*

Current & Pending Support (a.k.a. Other Support):

Not used at time of submission unless specified in FOA. For most applications, this will continue to be for “Just-In-Time” submission

Note: Only hi-level Professionals, preferably with terminal degrees, should be designated as “Senior Key Persons”

Project Role: Remember, NIH does not recognize the designation “Co-PI”. It does accept more than one PD/PI in cases of true multi-PI applications. (Make sure instructions allow multi-PI before adding. If additional PI’s will be allowed and utilized, they should be from separate disciplines and a Multi-PI Leadership Plan will be required to be uploaded on the Research Plan page.) The designation of “Co-Investigator” is available for other key persons in single PI applications.

Component:

PHS 398 Cover Page Supplement

- Includes Clinical Trial & Phase-III defined clinical trial indicators. (Must be answered if Human Subjects are indicated on Other Project Information page.)
- For the Business Official Contact, add completed contact information for Rena Vinyard (*title & mailing address needs to be added in section 5.*)
- Page 2 includes Human Embryonic Stem Cells section. This question must be answered. If answered “yes”, cell line number(s) must be included or check box for cell lines that are pending should be marked.

PHS 398 Cover Page Supplement

NIH Live Sample_ADOBE-FORMS-B.pdf - Adobe Acrobat Professional
File Edit View Document Comments Forms Tools Advanced Window Help

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

PHS 398 Cover Page Supplement OMB Number: 0925-0001

1. Project Director / Principal Investigator (PD/PI)

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

2. Human Subjects

Clinical Trial? No Yes
* Agency-Defined Phase III Clinical Trial? No Yes

3. Applicant Organization Contact

Person to be contacted on matters involving this application

Prefix: * First Name:
Middle Name:

Novell GroupWise - ... NIH Training Materi... Microsoft PowerPoi... NIH Live Sample_A...

6:55 AM

Component:

PHS 398 Cover Page Supplement Page 2

Blank sample R01.pdf - Adobe Reader

File Edit View Window Help

Tools Sign Comment Extended

Please fill out the following form. You can save data typed into this form. Highlight Existing Fields

PHS 398 Cover Page Supplement

Click on Sign to add text and place signature on a PDF File.

4. Human Embryonic Stem Cells

* Does the proposed project involve human embryonic stem cells? No Yes

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s) from the following list: <http://stemcells.nih.gov/research/registry/>. Or, if a specific stem cell line cannot be referenced at this time, please check the box indicating that one from the registry will be used:

Cell Line(s): Specific stem cell line cannot be referenced at this time. One from the registry will be used.

Component:

PHS 398 Research Plan

- Separate PDF attachments for Specific Aims and remaining body of Research Plan are needed.
- “Research Strategy” is typically limited to 6-12 pages, perhaps less, depending on the grant mechanism.
- Follow guidelines from general NIH Application Guide regarding page limits, formatting and section headings.
- Appendix Material
 - Allows up to 10 separate attachments
 - Will be stored separately in Commons in the eRA Grant Folder, not as a part of the main application grant image
 - Will be accessible to appropriate NIH staff and peer reviewers
 - Use links to on-line journals for publication references when available. See Guide Notice:
<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-06-051.html>

PHS 398 Research Plan

Standard Research Plan sections, not including Specific Aims, are now combined into one upload attachment called “Research Strategy”. This section is typically limited to 6 to 12 pages. (Refer to FOA.)

If Human Subjects box is checked on the Other Project Info page, then attachments for fields 6 through 8 must be uploaded. (Only field 6 for exempt studies.)

NIH Live Sample_ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

*Type of Application:

New Resubmission Renewal Continuation Revision

2. Research Plan Attachments:

Please attach applicable sections of the research plan, below.

1. Introduction to Application <small>(for RESUBMISSION or REVISION only)</small>		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
2. Specific Aims	Specific_Aims.pdf	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
3. *Research Strategy	Research_Strategy.pdf	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
4. Inclusion Enrollment Report		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
5. Progress Report Publication List		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

Human Subjects Sections

6. Protection of Human Subjects	Protection_Human_Subjects.p	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
7. Inclusion of Women and Minorities	Inclusion_Women_Minorities.	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
8. Targeted/Planned Enrollment Table	Targeted_Planned_Enrollment	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
9. Inclusion of Children	Inclusion_of_Children.pdf	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

Other Research Plan Sections

10. Vertebrate Animals	Vertebrate_Animals.pdf	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
11. Select Agent Research		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
12. Multiple PD/PI Leadership Plan		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
13. Consortium/Contractual Arrangements	Consortium_Contractual_Arra	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
14. Letters of Support	Letters_of_Support.pdf	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
15. Resource Sharing Plan(s)		<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

Novell Grou... Mail From... Mail From... http://hsc-l... SF424 (R&R)... NH Train... A PreAward... Microsoft P... NH Live Sa... SF424R-R bi... 4:17 PM

Component: *PHS 398 Research Plan – Helpful Hints*

- Make sure all uploads are converted to true PDF files.
- Do not include headers or footers
- Do include section headings as part of the text; i.e., Background & Significance, Preliminary Studies, Research Design and Methods.
- Human Subjects uploads are mandatory on Research Plan page if Human Subjects question is answered “yes” on Other Project Information page. (*Upload is only needed in field 6, if Human Subjects is marked exempt from regs.*)
- Avoid 2-column format for text (*difficult for reviewers to read electronically*)
- Avoid scanning when text has been generated using a word processing tool (*Specific Aims, etc.*)

Component: *PHS 398 Checklist*

- Captures additional information
 - Change of PI
 - Change of Grantee Institution
 - Inventions & Patents
 - Program Income
 - Contains Disclosure Permission check box for PI to answer. (Must be answered yes or no.)

Component: *PHS 398 Checklist*

NIH_2010Live Sample_ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

File Edit View Document Comments Forms Tools Advanced Window Help

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

*Budget Period	*Anticipated Amount (\$)	*Source(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. * Disclosure Permission Statement

If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?

Yes No

Novell GroupWise - ... Removable Disk (E:) Microsoft PowerPo... NIH_2010Live Sampl... 7:39 AM

Submission Specific Component:

PHS 398 Cover Letter

- Provides an attachment field for a wet-signed cover letter.
- Not advisable to convert to PDF using a scanner. Open a Word Processing document file then insert the scanned letter as a PDF object. Then use the Adobe PDF conversion tool to properly convert to PDF format. This helps avoid technical problems during transmission.
- Cover Letter is stored separately in the Commons Grant Folder, not as a part of the main application grant image
- Is seen only by appropriate NIH staff; not peer reviewers
- Is always recommended, but is only mandatory when submitting an Application after submission date under the exception rules

PHS 398 Cover Letter Upload

The screenshot shows a Microsoft Internet Explorer browser window displaying the PHS 398 Cover Letter upload page. The address bar shows the URL: <http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf>. The page title is "PHS 398 Cover Letter". At the top, there are three buttons: "Close Form", "Print Page", and "About". Below the title, the OMB Number is listed as "0925-0001". The main content area contains a label "*Mandatory Cover Letter Filename:" followed by a yellow rectangular input field. Below this field are three buttons: "Add Cover Letter File", "Delete Cover Letter File", and "View Cover Letter File". The browser's taskbar at the bottom shows the Start button and several open applications, including GroupWise Messenger, Novell GroupWise, Internet Explorer, and Microsoft PowerPoint. The system clock indicates the time is 12:43 PM on Friday.

Component: *Research and Related Budget, Sections A & B*

- Personnel separated into 2 sections
 - A. Senior/Key Personnel
 - Allows 8 as named individuals & structured data
 - >8 information can be uploaded as a PDF attachment (*not structured data, just text*)
 - Info for PD/PI must be entered, even if \$ = 0

Note: Salary cap is currently Executive Level II: \$179,700

B. Must enter effort in either Calendar months or Academic and/or Summer for all Senior/Key Persons

C. Other Personnel

- Postdocs, Grad Students, etc: aggregate totals only

Please fill out the following form. You can save data typed into this form.

Highlight Existing Fields

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 1

* ORGANIZATIONAL DUNS: 8298687230000

* Budget Type: Project Subaward/Consortium

Enter name of Organization: University of New Mexico Health

Delete Entry * Start Date: 12/01/2012 * End Date: 11/30/2013 Budget Period 1

Make sure this date is end of period 1

Expiration Date: 08/20/2014
Click on Sign to add text and place signature on a PDF File.

A. Senior/Key Person

Prefix	* First Name	Middle Name	* Last Name	Suffix	* Project Role	Base Salary (\$)	Cal. Months	Acad. Months	Sum. Months	* Requested Salary (\$)	* Fringe Benefits (\$)	* Funds Requested (\$)
1. Dr.	Bunny		Flower	M.D.	PD/PI	93,000.00	1.92			14,880.00	4,650.00	19,530.00
2.												
3.												
4.												
5.												
6.												
7.												
8.												

9. Total Funds requested for all Senior Key Persons in the attached file

Total Senior/Key Person 19,530.00

Additional Senior Key Persons:

B. Other Personnel

* Number of Personnel	* Project Role	Cal. Months	Acad. Months	Sum. Months	* Requested Salary (\$)	* Fringe Benefits (\$)	* Funds Requested (\$)
2	Post Doctoral Associates	1.92			9,200.00	2,200.00	11,400.00
	Graduate Students						
	Undergraduate Students						
	Secretarial/Clerical						

Other personnel are entered in aggregate

Component: *Research and Related Budget, Sections C – E*

- C. Equipment
 - Allows itemization of up to 10
 - >10 equipment items: details provided in an attachment – total funds requested in attachment are entered in Line 11
- D. Travel
 - R&R separates out Domestic & Foreign
 - This will not change any NIH policy/practice. We will continue to award as a single category.
- E. Participant/Trainee Support Costs
 - Will not be used by NIH unless specifically noted in an announcement
 - Tuition Remission will continue to be included in this Section
- F. Other Direct Costs

Please fill out the following form. Highlight Fields

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 1

* ORGANIZATIONAL DUNS:

* Budget Type: Project Subaward/Consortium

Enter name of Organization:

* Start Date: * End Date: Budget Period 1

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

	Equipment item	* Funds Requested (\$)
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>
11.	Total funds requested for all equipment listed in the attached file	<input type="text"/>
	Total Equipment	<input type="text"/>

Additional Equipment:

D. Travel

Funds Requested (\$)

1. Domestic Travel Costs (Incl. Canada, Mexico and U.S. Possessions)	<input type="text"/>
2. Foreign Travel Costs	<input type="text"/>
Total Travel Cost	<input type="text"/>

E. Participant/Trainee Support Costs

Funds Requested (\$)

1. Tuition/Fees/Health Insurance	<input type="text"/>
2. Stipends	<input type="text"/>
3. Travel	<input type="text"/>
4. Subsistence	<input type="text"/>
5. Other <input type="text"/>	<input type="text"/>
<input type="text"/> Number of Participants/Trainees	<input type="text"/>
Total Participant/Trainee Support Costs	<input type="text"/>

Component: *Research and Related Budget, Sections F - K*

- F. Other Direct Costs
 - Itemizes: Supplies, Publication Costs, Consultants, ADP/Computer Services, Consortium Costs, Equipment or Facility Rental/User Fees, Alterations & Renovations
 - This section may also be used to account for patient care costs & tuition remission (refer to agency-specific instructions)
- G. Total Direct Costs (A – F)
- H. Indirect Costs
- I. Total Costs (G+H)
- J. Fee
- K. Budget Justification – a PDF text attachment
- **Next Period Button**: At the top of the last budget page. All required data fields in this component must be entered before this button is available. This includes the Budget Justification. Clicking the “Next” button at the end of page three of a given period will take you directly to the cumulative budget page.

NIH_Training_LiveExercisePkg.pdf - Adobe Reader

File Edit View Window Help

Tools Sign Comment Extended

Please fill out the following form. You can save data typed into this form.

RESEARCH & RELATED BUDGET - SECTION F-K, BUDGET PERIOD 1

* ORGANIZATIONAL DUNS: 8298687230000

* Budget Type: Project Subaward/Consortium

Enter name of Organization: University of New Mexico Health

Delete Entry Start Date: 12/01/2012 End Date: 11/30/2013 Budget Period 1

Next Period

Click on Sign to add text and place signature on a PDF File.

F. Other Direct Costs

	Funds Requested (\$)
1. Materials and Supplies	47,070.00
2. Publication Costs	
3. Consultant Services	72,000.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	77,000.00
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8.	
9.	
10.	
Total Other Direct Costs	196,070.00

G. Direct Costs

	Funds Requested (\$)
Total Direct Costs (A thru F)	227,000.00

H. Indirect Costs

Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1. Modified Total Direct Costs	51.00	75,000.00	89,250.00
2.			
3.			
4.			
Total Indirect Costs			89,250.00

R&R Budget Sections F - K

Section F Other Direct Costs:

- Item 5 should show grand total of Subaward dollars
- Please note F&A base type for UNM is “Modified Total Direct Costs”.
- All budget figures should be in whole numbers
- “Next Period” button appears when period one is completed
- Budget justification is uploaded at bottom of page; will auto-populate subsequent budget periods

NIH_2010Live Sample_ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients.

Section A, Senior/Key Person		43,728.00
Section B, Other Personnel		28,437.00
Total Number Other Personnel	5	
Total Salary, Wages and Fringe Benefits (A+B)		72,165.00
Section C, Equipment		
Section D, Travel		
1. Domestic		
2. Foreign		
Section E, Participant/Trainee Support Costs		
1. Tuition/Fees/Health Insurance		
2. Stipends		
3. Travel		
4. Subsistence		
5. Other		
6. Number of Participants/Trainees		
Section F, Other Direct Costs		327,835.00
1. Materials and Supplies	83,835.00	
2. Publication Costs		
3. Consultant Services	144,000.00	
4. ADP/Computer Services		
5. Subawards/Consortium/Contractual Costs	100,000.00	
6. Equipment or Facility Rental/User Fees		
7. Alterations and Renovations		
8. Other 1		
9. Other 2		
10. Other 3		
Section G, Direct Costs (A thru F)		400,000.00
Section H, Indirect Costs		165,458.00
Section I, Total Direct and Indirect Costs (G + H)		565,458.00
Section J, Fee		

CUMULATIVE BUDGET

Applicant prepares a detailed budget for every budget period

No figures are entered on this page

The detailed Cumulative budget is system-generated

This figure must match total on page 2 of the SF424 section at front of application

Component: *R&R Subaward Budget Attachment Form*

- Used to collect and upload detailed budget from any consortium grantee
- ***Do not use for Modular Budgets***
- Consortium grantee(s) must have appropriate software installed for compatible completion of budget forms.
- Allows up to 10 separate budget attachments—one for each consortium grantee (over 10 add to Budget Just.)
- Applicant sends the R&R budget component to the consortium grantee for completion; it is returned to the applicant; applicant attaches it in this component
- Applicant still needs to include the total costs for all consortia in their own detailed budget, Section F.5

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf - Microsoft Internet Explorer provided

http://apply07.grants.gov/apply/opportunities/packages/oppPA-07-070-cidADOBE-FORMS-A.pdf

Please fill out the following form.

Close Form Print Page About

R&R SUBAWARD BUDGET ATTACHMENT(S) FORM

Instructions: On this form, you will attach the R&R Subaward Budget files for your grant application. Complete the subawardee budget(s) in accordance with the R&R budget instructions. Please remember that any files you attach must be a PDF document.

[Click here to extract the R&R Subaward Budget Attachment](#)

Important: Please attach your subawardee budget file(s) with the file name of the subawardee organization. Each file name must be unique.

1) Please attach Attachment 1	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
2) Please attach Attachment 2	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
3) Please attach Attachment 3	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
4) Please attach Attachment 4	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
5) Please attach Attachment 5	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
6) Please attach Attachment 6	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
7) Please attach Attachment 7	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
8) Please attach Attachment 8	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
9) Please attach Attachment 9	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
10) Please attach Attachment 10	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment

OMB Number: 4040-0001
Expiration Date: 04/30/2008

Start GroupWise Messenger Novell GroupWise - Mailbox 4 Internet Explorer Microsoft PowerPoint - ... Search Desktop Links 2:22 PM Friday

If more than 10 Subawardees add in Budget Justification

Note:
Send subaward packages out EARLY! Give subawardees a firm deadline to return them. Get Subawardee DUNS numbers prior to adding them. All Subawardees must have a DUNS number.

PHS 398 Modular Budget

Provides data entry fields for each budget period for only:

- A. Direct Costs (less Consortium F&A)
Consortium F&A (↑ F&A added back here)
Total Direct Costs**

- B. Indirect Costs (UNM F&A)
“Modified Total Direct Costs” x F&A rate**

- C. Total Costs (A + B)**

- D. Builds periods after page 1 block by block**

Please fill out the following form. You can save data typed into this form.

Highlight Existing Fields

PHS 398 Modular Budget

OMB Number: 0925-0001

Budget Period: 1

Start Date:
 End Date:

A. Direct Costs

	Funds Requested (\$)
Direct Cost less Consortium F&A	<input type="text" value="200,000.00"/>
Consortium F&A	<input type="text" value="27,000.00"/>
Total Direct Costs	<input type="text" value="227,000.00"/>

B. Indirect Costs

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
1.	Modified Total Direct Costs	51.00	175,000.00	89,250.00
2.				
3.				
4.				

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date Total Indirect Costs

C. Total Direct and Indirect Costs (A + B)

Funds Requested (\$)

Budget Period: 2

Start Date:
 End Date:

A. Direct Costs

	Funds Requested (\$)
Direct Cost less Consortium F&A	<input type="text" value="200,000.00"/>

Click on Sign to add text and place signature on a PDF File.

NIH_2010Live Sample ADOBE-FORMS-B.pdf - Adobe Acrobat Professional

Please fill out the following form. If you are a form author, choose Distribute Form in the Forms menu to send it to your recipients. Highlight Fields

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date Total Indirect Costs

C. Total Direct and Indirect Costs (A + B) Funds Requested (\$)

Cumulative Budget Information

1. Total Costs, Entire Project Period

*Section A, Total Direct Cost less Consortium F&A for Entire Project Period	\$	<input type="text" value="350,000.00"/>
Section A, Total Consortium F&A for Entire Project Period	\$	<input type="text" value="50,000.00"/>
*Section A, Total Direct Costs for Entire Project Period	\$	<input type="text" value="400,000.00"/>
*Section B, Total Indirect Costs for Entire Project Period	\$	<input type="text" value="165,458.00"/>
*Section C, Total Direct and Indirect Costs (A+B) for Entire Project Period	\$	<input type="text" value="565,458.00"/>

2. Budget Justifications

Personnel Justification	Personnel_Budget_Justificatio	Add Attachment	Delete Attachment	View Attachment
Consortium Justification	Consortium_Budget_Justificati	Add Attachment	Delete Attachment	View Attachment
Additional Narrative Justification		Add Attachment	Delete Attachment	View Attachment

**Modular
Cumulative
Budget is
system-
generated**

**Budget
Justification:
PDF text
attachments for
Personnel,
Consortium and
Other**

What Will a Completed Application Look Like?

- After submission, the **eRA system** will:
 - Assemble the grant image
 - Generate a Table of Contents
 - Include headers (PI name) & footers (page numbers) on all pages
- *Sample Document: “eRA Assembly of the SF424 (R&R) Application”*
 - Includes a *sample Table of Contents*, and
 - *a chart cross-referencing the location in the forms components for each piece of the grant image*

<http://grants.nih.gov/grants/funding/424/index.htm>

424 R&R and PHS-398 Specific Table Of Contents

	Page Numbers
SF 424 R&R Face Page-----	1
Table of Contents-----	3
Research & Related Project/Performance Site Location(s)-----	4
Research & Related Other Project Information-----	5
Project Summary/Abstract (Description)-----	6
Public Health Relevance Statement (Narrative attachment)-----	7
Facilities & Other Resources-----	8
Equipment-----	9
Research & Related Senior/Key Person-----	11
Biographical Sketches for each listed Senior/Key Person-----	13
PHS 398 Specific Cover Page Supplement-----	21
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Additional Narrative Justification-----	28
PHS 398 Specific Research Plan-----	29
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Protection of Human Subjects-----	47
Inclusion of Women and Minorities-----	48
Targeted/Planned Enrollment Table-----	49
Inclusion of Children-----	50

2-Day Pre-Deadline Viewing Window

- PI strongly recommended to view grant image within 2 weekdays of availability in the NIH Commons for any content errors **unless at or after submission deadline**
- Only AOR/SO (PreAward) has authority to “Reject” the image if there are errors
- If no rejection within 2 business days of image availability, application automatically proceeds to next step in NIH processing

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-11-035.html>

Other Tools

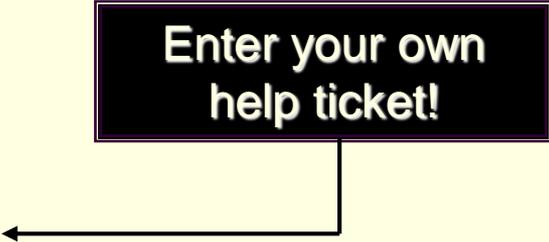
- UNMHSC PreAward Web-site
<http://hsc.unm.edu/financialservices/preaward/>
- Frequently Asked Questions
<http://era.nih.gov/ElectronicReceipt/faq.htm>
- Electronic Submission Timeline
http://era.nih.gov/ElectronicReceipt/strategy_timeline.htm
- Avoiding Common Errors
http://era.nih.gov/ElectronicReceipt/avoiding_errors.htm
- New Adobe Forms Version B Instructions and Attachments
<http://grants1.nih.gov/grants/funding/424/index.htm>

Finding Help: *eRA Commons/Grants.gov*

If help is needed with the eRA Commons registration or review process in the eRA Commons after submission through Grants.gov

- Check the resources available on the Grants.gov website first (<http://grants.gov/>)
- Grants.gov help is also provided by the following office:
Grants.gov Customer Support
Contact Center Phone: 1-800-518-4726
Business Hours M-F 7 a.m.-9 p.m. EST
Email support@grants.gov
- Check the resources available on the eRA Commons website:
<https://commons.era.nih.gov/commons/index.jsp>
- eRA Commons Help Desk
Phone: 301-402-7469
Toll Free: 866-504-9552
TTY: 301-451-5939
Business hours M-F, 7am-8pm EST
Email commons@od.nih.gov
Web support: <http://ithelpdesk.nih.gov/eRA/>

Enter your own
help ticket!



THANK YOU

**Call Your Contract & Grant Administrator in
PreAward Services HSC for Help 272-6264**

QUESTIONS???