2020 Guidelines and Grant Application for The Summers Way/Friends of TJ Young Investigator Grant

* A Young Investigator Grant is $50,000 for one year.
* **Application Deadline: September 1, 2020 (11:59 PM ET)**
* All submissions should be combined into a single PDF and submitted to www[@summersway.org](mailto:XXXXX@summersway.org)
* Announcement of Recipient: Dec 1, 2020,
* Start of Grant: January 1, 2021

## **Description**

The Summers Way/Friends of TJ Young Investigator grant award is designed to support scientists in the early stages of their research careers, such as postdoctoral or clinical fellows. Outstanding mentorship and demonstration of a career plan that shows commitment to pediatric cancer investigation are critical components of a successful application.

## **Eligibility Criteria**

* Applicants must have their M.D., Ph.D. or dual M.D., Ph.D. and must not have achieved an appointment higher than Instructor (Assistant Professor level faculty, including Adjuncts at this level, will not be considered).
* All other applicants must be within five years from the granting of the last doctoral degree.
* A minimum of 75% of the applicant’s time during the Young Investigator period must be allocated as protected time for all research activities.
* The applicant must not currently hold an NIH independent (R or P Award) or individual training (F or K Award) grant. Institutional training grants (K12, T32) are permitted. Funding from other foundations is permitted, but those without funding will be prioritized.
* A research mentor(s) must be identified and have a track record in pediatric oncology.

## **Budget**

* A maximum of $50,000 in total costs will be awarded. Budget items may include salary, fringe, travel, supplies and small pieces of equipment (less than $5,000).
* Funds from may not be used for indirect costs (including tuition remission).
* Funds must be granted to nonprofit institutions/organizations operating in the U.S. Researchers need not be United States citizens.

# **Application**

1. Application Cover Page (1 page): Use the template provided.
2. Project Overview and Lay Summary (250 words maximum)
3. Research Plan
4. Scientific Abstract with Specific Aims (1/2 page): Please summarize the research objectives and rationale.
5. Significance and Impact (1 page): Describe the relevant background for the current research plan. State the significance and importance of your proposed project with respect to pediatric cancer research. Relate the specific aims to the goals and long-term objectives. Describe how this project will lead to new or improved cures for or impact on pediatric cancer patients.
6. Approach (2 pages): Describe the overall strategy to accomplish the aims of the project. Describe methodology, analyses, and how research aims will be realistically accomplished within the proposed funding period. Provide an account of the PI’s preliminary studies pertinent to the application. Anticipation of potential problems and plans to deal with these is expected.
7. Literature Cited: A maximum of 30 references are allowed.
8. Career development and mentoring Plan (1 page): Describe the mentor’s role in the experimental design and execution. Describe detailed plan for career development including strategies for mentorship in pediatric oncology research, continued education, and future research/funding.
9. Mentor Letter of Recommendation: this letter is separate from the mentoring plan and should confirm the role and activities outlined in the mentoring plan.
10. Biographical Sketch(es): Use the NIH 5-page biographical sketch format for the principal investigator and mentor.
11. Budget and brief justification (1 page maximum)
12. Human Subjects (1/2 page): Include IRB number. Please note an IRB approval letter will be required for funding.
13. Vertebrate Animals (1/2 page): Include IACUC approval number. Please note an IAUCUC approval letter will be required for funding.
14. Collaborators and/or Consultants: Include any appropriate letters from individuals confirming their roles in the project.

GRANT COVER PAGE

### Project Title:

#### Young Investigator’s Name:

#### Email:

#### Phone:

#### Institution Name:

## Certification and Acceptance:

We, the undersigned, certify that the statements contained in the attached grant application are true and complete to the best of our knowledge. We understand and agree to conform to the rules governing the grant as set forth in the Guidelines document including the stipulation that Summer’s Way Foundation/Friends of TJ may not be used for any indirect costs.

#### Signature of Investigator: Date:

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#### Signature of Institution Authorized Official: Date:

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#### Name and Title of Authorized Official:

Please submit this grant cover page as part of your grant application.

You may provide signatures electronically or via a scanned original.