



# National Eczema Association RESEARCH GRANT APPLICATION INSTRUCTIONS

• Please read instructions carefully •

Applications and supporting materials must be submitted via email <u>info@nationaleczema.org</u>, no later than Friday, September 16, 2016 5:00 PM PDT.

### GENERAL INFORMATION AND INSTRUCTIONS

#### **Purpose**

The National Eczema Association (NEA) is now soliciting original, focused, and innovative research applications dealing with atopic dermatitis (AD) for research to be completed between January 1, 2017 and December 31, 2017. Applications will be accepted from around the world and must serve to further NEA's mission to improve the health and quality of life for individuals with eczema.

#### **2016 Research Priorities**

In 2015 NEA commissioned an audit of the existing burden of disease peer-reviewed literature on both pediatric and adult eczema/atopic dermatitis. This audit reviewed the prevalence, overall severity distribution, symptom and family burden, quality of life impact, and health economic impact atopic dermatitis has on patients and families. Dr. Aaron Drucker, Brown University, was awarded the grant to produce this audit.

Several areas were identified in the audit as evidence gaps: Quality of Life, Itch, Pain, Sleep, Pyschosocial, Marital Status, Social Life, Time, Economic Burden, and Academic / Occupational impacts.

In 2016, the NEA Scientific Advisory Committee and Board of Directors prioritized the following AD research gaps identified in audit as 2016 NEA Research Grant Program priority projects. They are: Sleep and AD, Quality of Life Impact on Individuals and Families, and Understanding Pain in Patients with AD.

Applications are reviewed and awarded on a competitive basis. These awards may not be used to support the salary of established investigators but can be used to support post-doctoral fellows or entry-level junior faculty under certain circumstances. Indirect costs are not allowed.

### **Award Process**

The research grant applications will be reviewed by a Peer Review Committee, and awarded and announced by the NEA Board of Directors. Recipients will be notified by email as soon as possible after the selections have been made in December 2016.

#### **Distribution Of Funds**

Funds are paid directly to the institutional fiscal officer designated in the application, and are to be used only for the recipient and project for which the application was made. Grants are disbursed in three equal installments; one at initiation, a second upon receipt of a six-month progress report, and the third and final installment is contingent upon receipt by NEA of a final report.



### REQUIRED DOCUMENTS

**I. PROPOSAL** A brief discussion of the aims and relevance of the proposed research project must be included in this application in sufficient detail for evaluation.

Proposal Outline and Instructions

#### A. LAYMAN'S STATEMENT FOR NEA

- 1. In a brief paragraph describe your proposal in layman's terms. Do not exceed 10 lines. (This will be used for press announcements and award presentation purposes.)
- 2. In layman's terms describe in greater detail your proposal and its significance. Do not exceed one page.

#### **B. DESCRIPTION**

Describe your proposal in sufficient detail for adequate evaluation. Make every effort to be succinct. Do not exceed 10 pages. Do not submit a copy of an application prepared for another granting agency, copies of previous publications, or other supplemental documents. A suggested format is listed below.

### 1. Specific Aims

What do you intend to accomplish? What hypothesis is to be tested? (1 Page)

### 2. Background and Significance

Why is the research important? Evaluate existing knowledge in the field and specifically identify the possible contributions that your investigation may make.

#### 3. Preliminary Studies

What has already been done in this field?

#### 4. Approach and Experimental Design

How are you going to accomplish the research? Describe in detail the experimental design, the procedures to be used, and the manner in which the data will be analyzed.

### 5. Organizational Design and Feasibility

#### 6. Literature Cited

Include a literature listing.

**Note**: The NEA Grant Application follows similar guidelines to NIH-style applications. Tips for writing these sections may be found at <a href="http://grants.nih.gov/grants/how-to-apply-application-guide.htm">http://grants.nih.gov/grants/how-to-apply-application-guide.htm</a> or <a href="http://www.niaid.nih.gov">http://www.niaid.nih.gov</a>



## II. REQUIRED FORMS AND DOCUMENTS

	Completed Proposal			
	Completed Application Form (form below)			
	Completed Biographical Sketch			
	Completed Institutional Data Form with signatures (form below)			
	Completed Letter of Recommendation			
	A  supporting  letter  from  the  applicant's  immediate  supervisor  is  requested  and  must  accompany  the  grant  application.			
	Completed Research Grant Agreement Form with signatures (form below)			
	Include IRB Approval Form, if appropriate (form below)			
All above materials must be submitted via email to <a href="mailto:info@nationaleczema.org">info@nationaleczema.org</a>				
Subjec	Subject Line: NEA 2016 Research Grant Proposal Submission			

Subject Line: NEA 2016 Research Grant Proposal Submission NO LATER THAN 5:00 PM PDT, Friday, September 16, 2016. NO EXCEPTIONS CAN BE MADE TO THIS DEADLINE.

National Eczema Association 4460 Redwood Highway Suite 16D San Rafael, CA 94903 415.499.3474 or 800.818.7546 info@nationalezema.org nationaleczema.org





## **National Eczema Association Grant Application**

Date	
Date	
Title of Grant Proposal	
Amount Requested \$	Start Date
INVESTIGATOR	OR APPLICANT
Name	
Title	
Current mailing address	
Telephone	Office
Home or Cell	Fax
Email	
Position	
	Current
	During period of support
U.S. Citizen?	□ YES □ NO
	If not: Citizenship & visa type





# **CO-INVESTIGATOR** Name Title Current mailing address Telephone Office Home or Cell Fax Email Position Current During period of support U.S. Citizen? ☐ YES If not: Citizenship & visa type



## **CURRENT AND PENDING SUPPORT**

List all current support and other pending applications for financial support of the research programs and indicate amounts.

Source	
Amount	Years
Source	
Amount	Years
Source	
Amount	Years
Source	
A	Va sus
Amount	Years

## **BUDGET DATA**

### **BUDGET SUMMARY**

	GRANT FUNDS	MATCHING FUNDS	TOTAL
Personnel			
Equipment (non-expendable)			
Supplies (expendable)			
Other			
TOTAL			



### **DETAILED BUDGET**

Provide a detailed budget below or as a separate attachment. Include a concise statement of how you propose to allocate funds (amount and for what purpose). Separately list each item of equipment with a unit acquisition cost of \$500 or more. Itemize supplies in separate categories. Summarize budget below. *Please explain how monies will be spent should monies be awarded from another pending application*.





Please answer the following questions.		
1. What percent of effort will the principal investigator(s) spend on this project?		
2. Do you have other research funding for your laboratory, either active or pending? Do you have other research funding for this specific project, either active or pending? If yes, indicate amount(s) and all source(s) of funds, both public and private.		
3. What other projects are you doing? How is this work supported? Indicate dollar amount(s) of support and all sources of funds, both public and private. What percent of effort are you spending on those projects.		



4. Have you had previous funding from NEA? If so, list date(s), amount(s), and project title(s).
5. Has your previously funded work from NEA been published? Please list titles, publications and dates of publitions.
6. Is your organization's human research protection program accredited? If yes, by which accrediting body? If n does your organization plan to seek accreditation?





# NEA RESEARCH GRANT APPLICATION INSTITUTIONAL DATA

Please complete with all appropriate signatures and submit with entire Grant Application as outlined on the NEA Grant Application Instructions. Name of Institution Location Phone Sponsoring Department Address Head of Sponsoring Dept. Administrative Official Address Title Phone Without complete and accurate information for this section, checks cannot be mailed. Fiscal Officer (to whom check should be mailed) Address Name Title Phone Signature of Fiscal Officer/Department Signature of Project Director or Applicant

Signature of Administrative Official

Signature of Department Head



# INSTITUTIONAL REVIEW BOARD

# **Certification and Agreement**

The following document must be on file in the National Eczema Association (NEA) office prior to initiation of patient recruitment.

I/We certify: (check all that a	annlu						
		duled NFA events					
	Product/medication involved in the research project outlined below is FDA-regulated and has institutional review board approval.						
☐ Developer or manufact	turer of the drug to be studie	d supports the resear	ch study.				
□ Other	Other						
The project is described as	s follows:						
☐ I/We agree to release t	ine NEA from any and all litig	lation that may occur	with regard to the research study.				
Name/Title of the							
Principal Investigator							
Name of Charles/Conseque							
Name of Study/Sponsor							
Name/Title of person							
completing this form							
Telephone		Address					
Fav							
Fax							
Date when patient recruitr							
will no longer be necessary	y						
Signature		Date					