

APPLICATION PACKET FOR
JACKI and BRUCE BARRON
CANCER RESEARCH SCHOLARS' PROGRAM
POSTDOCTORAL FELLOWSHIPS
IN CANCER RESEARCH
(A PARTNERSHIP BETWEEN ICRF AND CITY OF HOPE)

This Packet Contains the Following:

1. General Policies Governing these Grants
2. Instructions for Filling Out the Application Form
3. Application Form



IMPORTANT!!! PLEASE READ THE FOLLOWING
BEFORE FILLING OUT THE APPLICATION FORM!!!



- ◆ Before any application will be processed or reviewed, all of the required items must be completed exactly as requested. Failure to follow any of the instructions precisely will result in the application not being reviewed.
- ◆ Please note that the actual application form consists of five (5) pages, exclusive of this page and the checklist (prepared for 8.5" x 11" paper with .25" margins). If yours is more than 5 pages, then you did not fill it out correctly and must reformat. Please view or print the PDF version so that you will see the correct layout. Do not alter the various section sizes or the borderlines on the application form.
- ◆ When preparing your Research Plan, please pay particular attention to the page limitations. The required font is Arial 11 point, with half-inch margins. Figure legends may be smaller.
- ◆ Please provide the C.V. and publication list for all key personnel involved in the project, including postdoctoral fellows, research assistants, research associates, consultants and collaborators. (If a project participant has a doctoral degree, then his or her C.V. and publication list must be included.) (The required C.V. format is an NIH Biosketch. Click [Here](#) for more info.)
- ◆ All institutional approval letters for the use of Animals and/or Human Subjects in your experiments must be written in English. No supplemental materials will be accepted after the deadline unless requested by ICRF.
- ◆ Please submit your application as an E-mail attachment to: grants@icrfny.org. Make sure to include all required C.V.s and publication lists, and all other appended materials. Printed copies are not necessary. One PDF file of the full proposal is preferable, but if the file is too large to E-mail, it may be sent in several smaller files.

GENERAL POLICIES GOVERNING
JACKI and BRUCE BARRON
CANCER RESEARCH SCHOLARS' PROGRAM
POSTDOCTORAL FELLOWSHIPS
IN CANCER RESEARCH

The Israel Cancer Research Fund (ICRF) is a voluntary charitable organization that receives its total income from private donations. Its main goals are the advancement of cancer research and the training of Israeli scientists in Israel. To that end, funds for cancer research are available to citizens of Israel, both native-born and those who have settled. Funds are not available to visiting scientists. (Proof of Israeli citizenship must be furnished upon request.)

Funds may be requested for clinical or basic research or training, which must relate to cancer. For purposes of this grant category only, the postdoctoral fellowship training must take place at City of Hope in Duarte, California, USA. The application should be submitted by the Israeli postdoctoral candidate, with input from a designated sponsor at City of Hope. For a list of participating City of Hope faculty, please visit the following website: <http://www.cityofhope.org/cancer-research-scholars-program>.

Information on applying for ICRF research grants can be downloaded from our website, or obtained from the address above. For any questions or problems, please send an E-mail message to: ellen.rubin@icrfny.org.

Each application is reviewed by a Scientific Review Panel of the Israel Cancer Research Fund (the Fund) and evaluated for its (1) scientific content and rationale; (2) qualifications, experience and productivity of the candidate; (3) facilities and scientific environment available to the candidate. The relationship of the research to cancer must be defined in the application. The rankings and recommendations of the Scientific Review Panels are presented to the International Scientific Council for final consideration. The Board of Trustees of the Fund then approves all awards.

BEFORE ANY APPLICATION WILL BE PROCESSED OR REVIEWED, ALL OF THE REQUIRED ITEMS MUST BE COMPLETED EXACTLY AS REQUESTED; OTHERWISE THE APPLICATION WILL BE REJECTED AUTOMATICALLY.

Timetable for the Awarding of Grants

<i>RECEIVED BY THE FUND IN NEW YORK</i>	<i>NOTIFICATION OF DECISION</i>	<i>ACTIVATION OF AWARD</i>
December 30	July 1	September 1

Postdoctoral Fellowship Eligibility

Postdoctoral Fellowship awards are intended to support young investigators during their period of postdoctoral training. The awards are made to each sponsoring institution with the understanding that they will support a specific project that will be conducted by a particular postdoctoral scientist under the supervision of a designated sponsoring senior investigator.

Postdoctoral Fellowship awards are given preferentially to those persons who will have had no more than three years of postdoctoral fellowship or equivalent experience prior to the date on which the ICRF award is to begin.

The ICRF also encourages Fellowship applications from M.D.s who wish to pursue additional investigative work in a laboratory setting to acquire research experience. Proposals for this type of support will require supporting documents indicating that the applicant has a serious commitment to a career in academic medicine or one supported by institutional resources in basic or applied clinical research. The applicant must devote at least 50% of his or her time to the laboratory work.

The Fund will not approve applications for a candidate's continued work in the same laboratory in which the doctoral degree was completed.

Duration and Amount of the Award

Postdoctoral Fellowships are awarded, contingent upon the availability of funds, for three (3) years at a stipend of \$71,203 per year (or \$213,609 in total). Funding for the second and third years is contingent upon receipt of satisfactory annual progress reports. (It is expected that upon completion of this grant, the Israeli scientist will return to Israel, unless prior arrangements have been made and agreed to *in writing* between the scientist and the ICRF. Failure of the scientist to abide by these terms will allow the ICRF to recover funds in toto.)

Fiscal Requirements for Institution

A separate account must be maintained for each award. This account must be available for audit at any time by representatives of the ICRF.

The funds are to be used for actual direct expenses connected with the project. No overhead, clerical or other administrative charges can be made by the institution against the award funds. Up to \$10,000 per City of Hope laboratory will be available for supplies and use of Cores.

A report of these expenditures, detailing the utilization of the funds (salaries, supplies, etc.), must be submitted to ICRF annually. Forms will be sent directly to the institution by the ICRF office. These reports will be shared with City of Hope.

Special Leave

- A. There is no leave of absence with support for a Postdoctoral Fellow.
- B. Leave without award support requires the prior approval of the ICRF and City of Hope and will be granted only in unusual situations. Such leave may not exceed 12 months. Support from other sources is permissible during the period of leave, and such leave does not reduce the total number of months of program support for which an awardee is eligible.

Special Conditions

Should the ICRF awardee, sponsor, or the sponsoring institution specified by our award vacate the project, the ICRF will automatically void the award and terminate funding. Failure of the institution to notify the fund of such vacancy will allow the ICRF to recover funds in toto.

Reporting

An annual narrative and financial report from each institution involved detailing the progress made and allocation of funds will be required 30 days after the completion of each funding period. ICRF will send forms directly to each institution. Reports will be shared with City of Hope.

Biohazards and Protection of Human Subjects and/or Animals

Safeguarding the rights and welfare of human subjects and/or animals involved in activities supported by the ICRF as well as consideration of potential biohazards is the responsibility of the institution that received the award. Awards for projects involving human subjects and/or animals require prior review and approval by the appropriate institutional committee. That written approval must be submitted along with the ICRF application. The review date should be recent; certification is invalid if the review date precedes the submission date by more than one year. These approval letters must be written *in English*.

Publications

Publications resulting from projects supported by the Fund must contain the following acknowledgment:

"This study was supported by a Postdoctoral Fellowship from the Jacki and Bruce Barron Cancer Research Scholars' Program, a partnership of the ICRF and City of Hope, as supported by The Harvey L. Miller Family Foundation"

Awardees should send electronic copies of publications carrying the above credit line to the ICRF International Executive Office in New York as soon as possible after publication.

Patents

Any decisions concerning intellectual property created or developed under the Jacki and Bruce Barron Cancer Research Scholars' Program Grant and pursuant to joint research activities between City of Hope and ICRF, including but not limited to ownership, responsibility for patent prosecution or other statutory protection, and if applicable, commercialization, will be reviewed in consultation between City of Hope and ICRF.

Changes and Amendments

Any changes or amendments to the original award must be approved in writing by the ICRF and City of Hope.

**ONLY ONE (1) GRANT APPLICATION PER ISRAELI INVESTIGATOR
WILL BE ACCEPTED FOR EACH SUBMISSION DEADLINE**

INSTRUCTIONS FOR FILLING OUT THE
JACKI and BRUCE BARRON
CANCER RESEARCH SCHOLARS' PROGRAM
POSTDOCTORAL FELLOWSHIPS
IN CANCER RESEARCH

GENERAL INSTRUCTIONS - Please read the following carefully:

- Applications must be completed in standard American or British English. If English is not your first language, we strongly urge that the application be reviewed and corrected by someone perfectly fluent in grammatical, idiomatic English. Stated simply, this means that your chances of having your application understood will be greatly increased if you follow the suggested approach. Do not use abbreviations without definition, unless they are obvious to all (e.g., M.D., DNA).
- Before filling out the application, read the “General Policies Governing the “Jacki and Bruce Barron Cancer Research Scholars’ Program.” Follow all directions carefully.
- Fill out each item in each section completely. Make sure that your name appears on the upper right-hand corner of every page.
- The entire text of the application should be in the Arial font. On the application form, the font size must not be smaller than Arial 10 point, 6 lines per vertical inch. For the Research Plan, the font size must not be smaller than Arial 11 point with half-inch margins all around. (Only figure legends may be in a different font and/or one size smaller point size.)
- Do not alter the borderlines on the application form. ***Please note that the actual application form consists of five (5) pages, exclusive of the checklist (prepared for 8.5” x 11” paper with .25” margins). If yours is more than 5 pages, then you did not fill it out correctly and must reformat.*** (Please view or print the PDF version of the application form so that you will see the correct layout.)
- Please submit your application as an E-mail attachment to: grants@icrfny.org. Make sure to include all required C.V.s and publication lists (the NIH Biosketch is the required format), and all other appended materials. *Printed copies are not necessary.* One PDF file of the full proposal is preferable, but if the file is too large to send in one E-mail, it may be sent in several smaller files. No supplemental materials will be accepted after the deadline unless requested by ICRF.

FAILURE TO FOLLOW ANY OF THESE INSTRUCTIONS PRECISELY WILL RESULT IN REJECTION OF THE APPLICATION PRIOR TO SCIENTIFIC REVIEW AND FORFEIT OF A CHANCE TO COMPETE FOR AN AWARD IN THE CURRENT YEAR.

SPECIFIC INSTRUCTIONS

These must be followed precisely. Read these instructions, item by item, as you fill in each section of the application form. If you have any questions, telephone us or send an E-mail message to: ellen.rubin@icrfny.org

1. Date of application: Self-explanatory.

2. Name of Applicant: Last name first in CAPITAL LETTERS, first and middle names in Upper and lower case letters. Indicate degree (e.g., M.D., Ph.D., etc.).
 - 2a. Your Signature is required in addition to your printed name. Your signature indicates your agreement to abide by ICRF's rules and regulations, if an award is made to you.

3. Name of Sponsor: Last name first in CAPITAL LETTERS, first and middle names in Upper and lower case letters. Indicate degree (e.g., M.D., Ph.D., etc.).
 - 3a. Your Sponsor's Signature is required in addition to the printed name. This signature indicates that your sponsor is aware of the nature of your proposal.

4. Permanent Address: This is an address at which you can always be reached (such as your home address in Israel).

5. Location of Proposed Project: Self-explanatory. Include Telephone, Fax number, and E-mail Address.

6. Title of Project: Do not exceed the space provided – Maximum 90 characters, including spaces and punctuation. Do not use a font size smaller than Arial 10 point.

7. Put an "X" in the appropriate box(es). Attach appropriate assurances of compliance from the institutional authorities (*which must be written in English!*). The review date should be recent; certification is invalid if the review date precedes the submission date by more than one year.

8. Period of Award: This has already been filled in for you.

9. Work Address: Self-explanatory. (This must only be completed, if different than No. 5 above. If the information is the same, then simply type in 'same as above.')

10. Institution's Financial Officer: Self-explanatory.

11. Person Authorized to Sign for Institution: This should be the president, director, or other in authority. This signature indicates willingness of the institution to abide by all of the rules and regulations of the ICRF.

12. Please indicate whether you have ever received an ICRF Postdoctoral Fellowship and, if so, please indicate the inclusive years.

12a. If you have answered "yes" in Item 12, place an "X" in the appropriate box.

13. Full C.V. and Publication List: This must be included. Attach your C.V. and publication list (as well as those of any other personnel with a doctoral degree) after the reference section of your research plan. The required format is an NIH Biosketch. For information on the NIH Biosketch format, please visit the following website: <https://grants.nih.gov/grants/forms/biosketch.htm> You must also attach a letter of recommendation and C.V./publication list from your sponsor. This letter should include a statement on how this training will prepare you for a research career. The application will not be considered without this. Lastly, include the names, titles, and email addresses of two scientists who will submit letters of reference on your behalf, and indicate whether the letters are included or will be sent separately, prior to the submission deadline.

14. Facilities Available: State floor space available to you in sq.m. or sq.ft. Indicate the nature of the space (i.e., office, laboratory, radiation therapy room). List major items of equipment available for your exclusive use. List shared facilities separately (e.g., liquid scintillation counter, 20% time).

15. Present Research Support Available: This item must be completed carefully and fully.

Please Note: Providing this information will not necessarily preclude you from receiving an award, but failure to include it may result in rejection of your application.

- First, indicate and list each grant of which you are *Principal Investigator* as (PI). State funding organization, grant title, % full time equivalents (FTE) of your time, total amount in US Dollars (\$), total duration of awards, in that order. Example: (PI) NIH, Cholesterol levels in blood of fatted calves, 20%, \$125,000. 12/01/16-11/30/19 (MO/DAY/YR).
- Next, indicate and list each grant of which you are a *Co-Investigator* as (CI). State funding organization, grant title, principle investigator, %FTE of your time, total amount in dollars (\$), total duration of award. Example: (CI) Volkswagen Stiftung, Molecular biology of ugly ducklings. Leshek Walenza, PI, 15%, \$300,000. 01/02/16-12/31/18 (MO/DAY/YR).
- Then, indicate and list, in the same format, all applications currently under consideration as (Submitted).

If you have no current support and/or submitted applications, please indicate "none" where appropriate.

16. Proposed Budget: Present this in detail for a three-year time period.

16A. Personnel: Names and positions of all personnel must be individually listed and the percentage of time to be devoted to the project by each person should be noted, even when salary is not requested. If an individual has not yet been selected, please list as "to be determined." List consultants here also, and include letters of intent to collaborate in the Appendix. (Please also provide in the Appendix the C.V. and publication list in NIH Biosketch format for all key personnel involved in the project, including postdoctoral fellows, research assistants/ associates, consultants and collaborators. **If a project participant has a doctoral degree, then his or her C.V. and publication list must be included.**)

- 16B. Equipment: List separately and justify the need for each item of equipment requested in Item No. 17 on page 4/5.
- 16C. Supplies: Group these into major categories (glass and plasticware, chemicals, radioisotopes, etc.) ***If the project involves the use of proprietary drugs, you must include in the Appendix a letter from the drug manufacturer or supplier indicating that they will have no control over publication or dissemination of the results of the study.***
- 16D. Other: Examples of allowed miscellaneous expenditures include publication costs, computer time, equipment maintenance, etc.
- 16E. Total: Enter the sum total of the requested support.
17. Budget Additions and Justifications: Provide sufficient information in order to justify all items of equipment, the need for personnel, supplies, and any other miscellaneous and/or unusual expenses.
18. Relevance to Cancer: Provide a short paragraph of approximately 200 words or less, in non-technical language, explaining how your work is relevant to the clinical problem of cancer. (The ICRF recognizes that cancer research encompasses a very broad spectrum and that progress in cancer control will, therefore, come from taking the broadest possible view, consistent with our mission, of what constitutes cancer research.)
19. Research Plan: Please note that Items 19a, 19b, and 19c must all fit on page 5/5 of the application form. Do NOT continue on a second page, or you risk disqualification of your application.
- 19a. The applicant's name, sponsor's name, and the title of the application (same as the information contained on Page 1 of the application form) must appear at the top of this page.
- 19b. Research Plan Summary: Summary must not exceed the space indicated and be printed in the Arial 10 point font or larger. Make sure you underline key words. Emphasize new approaches and knowledge to be gained.
- 19c. Research Plan in Detail: Include sufficient information to facilitate an effective review without reference to any previous application. Be specific and informative and avoid redundancies. Reviewers will consider brevity and clarity in the presentation as indicative of an applicant's approach to a research objective and ability to conduct a superior program.
1. Specific Aims: State clearly and concisely what the research described in this application is intended to accomplish and/or what hypothesis is to be tested. Proposals should be realistic in terms of work to be accomplished within the period of time for which support is requested. **DO NOT EXCEED THE SPACE PROVIDED ON PAGE 5. This section MUST appear on page 5/5 (Item 19c) of the application form.**

The following sections should be attached as additional pages. Text should be single-spaced using the Arial 11 point font, 6 lines per vertical inch, with a minimum of half-inch margins, formatted for 8.5" x 11" paper size.

Organize Sections of the RESEARCH PLAN to answer these questions: a) What do you intend to do? b) Why is the work important? c) What has already been done? d) How are you going to do the work?

DO NOT EXCEED THE NUMBER OF PAGES DESIGNATED FOR EACH SECTION. Failure to conform to the guidelines on font size, page length, or project scope may impact unfavorably on the priority score, or result in the application being returned to the investigator without review.

Please adhere to the following format:

- Significance: Briefly sketch the background of the present proposal, critically evaluate existing knowledge and specifically identify the gaps that the project is intended to fill. State concisely the importance of the research described in this application by relating the specific aims to longer-term objectives. DO NOT EXCEED ONE (1) PAGE.
- Preliminary Studies: Use this section to provide an account of your preliminary studies pertinent to the application and/or any other information that will help to establish your experience and competence to pursue the proposed project. The titles and complete references to appropriate publications and completed manuscripts must be listed, and not more than three (3) publications may be submitted as an APPENDIX. DO NOT EXCEED TWO (2) PAGES EXCLUSIVE OF APPENDIX.
- Research Design and Methods: Discuss in detail the experimental design and the procedures to be used to accomplish the specific aims of the project. Describe the protocols to be used and provide a tentative sequence or timetable for the investigation. Although the time estimated should not exceed the term for which support is requested, it is helpful to state how this project fits in with your long-term research goals. Describe any new methodology and its advantage over existing methodologies. Discuss the potential difficulties and limitations of the proposed procedures and alternative approaches for achieving the aims. In a separate subsection, point out any procedures, situations, or materials that may be hazardous to personnel and the precautions to be exercised. DO NOT EXCEED THREE (3) PAGES.
- Statistical Analysis: Include the means by which the data will be statistically analyzed and interpreted. Any project that includes a planned number of observations (especially population studies, epidemiology, or clinical trials) must indicate the number of subjects or experiments needed for statistical analysis, indicating clearly the reasoning for obtaining such numbers. Hypotheses that predict a null outcome must be tested with sufficient statistical power, and the power of planned experiments to pursue these hypotheses needs to be clearly stated. Projects that do not indicate the statistical power for a given sample size and/or indicate the probability of finding significance will not be considered at all! The above information can be brief (i.e., 150 words or less). If no statistical analysis is necessary, then please indicate this in this section. DO NOT EXCEED ONE (1) PAGE.
- References: Cite these in full. This includes first and last pages of articles.
- Appendix: Appended materials may include letters of collaboration, copies of publications (no more than 3, please!), tables and figures, etc. However, the appendix section should not be used to bypass the page limitations.

POSTDOCTORAL FELLOWSHIPS

This application should be submitted by the Israeli postdoctoral candidate, with input from a designated sponsor at City of Hope. For a list of participating City of Hope faculty, please visit the following website: <http://www.cityofhope.org/cancer-research-scholars-program>

1. Date of Application (mo/day/yr): _____

2. Name of Applicant: _____
 LAST (IN CAPITAL LETTERS), First, Middle; Degree

2a. Signature: _____

3. Name of Sponsor: _____
 LAST (IN CAPITAL LETTERS), First, Middle; Degree

3a. Signature: _____

4. Permanent Address: _____

 Tel. No.: _____ Fax No.: _____
 E-mail Address: _____

5. Location of Proposed Project: _____

 Tel. No.: _____ Fax No.: _____
 E-mail Address: _____

6. Title of Proposed Research Project (Do Not Exceed This Space – Maximum 90 Characters, including spaces and punctuation):

7. This Project Involves the Following: <input type="checkbox"/> Immunology and Immunotherapy <input type="checkbox"/> Proteomics and Protein Structures <input type="checkbox"/> Clinical and Translational Research <input type="checkbox"/> Genetics and Genomics <input type="checkbox"/> Model Organisms	(Check <u>All</u> that Apply) <input type="checkbox"/> Cancer Stem Cells <input type="checkbox"/> Intracellular Trafficking <input type="checkbox"/> Membrane Biology <input type="checkbox"/> Metabolism and Cancer <input type="checkbox"/> Cell Signaling	<input type="checkbox"/> RNA Metabolism <input type="checkbox"/> Human Subjects* <input type="checkbox"/> Animals* (*Attach Institutional Approval) <input type="checkbox"/> Other (please fill in) _____ _____
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8. Period of Award: from (mo/day/yr): **09/01/2018** to (mo/day/yr): **08/31/2021**

9. Work Address: (if different than No. 5 above)

 Tel. No.: _____ Fax No.: _____
 E-mail Address: _____

10. Institution's Financial Officer
 Name: _____
 Title/Position: _____
 Address: _____

 Tel. No.: _____ Fax No.: _____
 E-mail Address: _____

11. Person Authorized to Sign for Institution
 Name: _____
 Title/Position: _____ Signature: _____
 Address: _____

 Tel. No.: _____ Fax No.: _____ E-mail Address: _____

12. Have you ever received an ICRF Postdoctoral Fellowship? Yes No (If Yes, when? _____)

12a. Does this application represent a continuation of work previously funded by ICRF? Yes No

13. After the *References* section of your Research Plan, please attach the following:

A. Your Full C. V. and Publication List (in NIH Biosketch format)

B. Full C.V. and Publication List of your Sponsor, along with a Letter of Recommendation (*This must be included.*)

C. Names, titles, and email addresses of two scientists who will submit letters of reference on your behalf:
 (check one) will be sent under separate cover prior to the submission deadline the letters are attached.

Please make sure to provide the C.V. and publication list for all key personnel involved in the project, including research assistants, research associates, consultants and collaborators. (If a project participant has a doctoral degree, then his or her C.V. and publication list must be included.)

14. Facilities Available (i.e., Laboratory Space.) Include items of permanent equipment, core facilities, etc.

15. Present Research Support Available (See Page 3 of the Instructions before beginning)

(This section **MUST** be filled out. Fully itemize below **all** institutional funds, **and all other support** available to the investigator, **including** all applications currently under consideration. **Please Note:** *Providing this information will not necessarily preclude you from receiving an award, but failure to include it may result in rejection of your application.* If you have no current support and/or submitted applications, please indicate "none" where appropriate.)

<u>Funding Organization</u>	<u>Grant Title</u>	<u>% of Your Time (FTE)</u>	<u>Total Amount (US Dollars)</u>	<u>Duration of Grant</u>
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16. Proposed Budget	Year 1	Year 2	Year 3
A. Personnel <i>(Please List Name, Title, Role in Project, and % Time. Attach C.V. and publication lists for all personnel with a doctoral degree in NIH Biosketch format.)</i>			
B. Equipment			
C. Supplies (by category)			
D. Other (List)			
E. TOTAL			

17. Budget Additions and Justifications:

18. Relevance to Cancer: (See Page 4 of the Instructions before beginning.)

19a. Research Plan

Name of Applicant: _____

Name of Sponsor: _____

Project Title: _____

19b. Research Plan **Summary** (Do **not** exceed this space; make sure you underline key words)

19c. Research Plan in Detail (See Page 5 of the Instructions before beginning; Do **not** exceed page limitations)

1. **Specific Aims** (Do **not** exceed this space; This section **must** appear on this page)

APPLICATION CHECKLIST

The checklist below should be used as a reference, in order to ensure that your application is complete. Applications will be automatically disqualified unless **all** of the requested items are included when submitted. (This page does not have to be included with your submission, nor do all of the pages that precede the actual application form.)

Please check the box next to each item as you complete it.

- 1. The completed application, arranged in the following order:
 - A. Pages 1-5 of the Application Form
 - B. Significance
 - C. Preliminary Studies
 - D. Research Design and Methods
 - E. Statistical Analysis
 - E. References

- 2. C.V. and Publication Lists (in NIH Biosketch format)
 - A. Applicant
 - B. Sponsor
 - C. Additional personnel involved in the project with a doctoral degree (if any)

- 3. Letters of Recommendation
 - A. Sponsor
 - B. Reference No. 1 Will be sent separately prior to the deadline
 - C. Reference No. 2 Will be sent separately prior to the deadline

- 4. Committee Approval Letter(s) for use of: Human Subjects Animals

- 5. All appended materials, including no more than three (3) publications (Appendix)

- 6. All required Signatures are on the application form (Items 2a, 3a, and 11a)

- 7. The complete application has been sent as an E-mail attachment to: **grants@icrfny.org**

**ALL ITEMS MUST BE RECEIVED BY
THE ICRF INTERNATIONAL EXECUTIVE OFFICE
ON OR BEFORE DECEMBER 30, 2017**