**Title:** *Please enter application title*

**Applicant Name:**  First Last Name, Degree(s)

Academic Title:

Primary Research Mentor:

PGY:

Division of

Address, Office

City, State Zip

Phone:

Email:

**PROPOSAL CHECKLIST** Incomplete applications will not be accepted past 5:00pm on submission deadline. No extensions are granted for missing items. Please use the checklist below to ensure you have included all of the required documents. (Do not include this checklist in the final application)

Budget Worksheet attached separately as an excel sheet and included in the PDF (please use MCHRI’s template)

Introduction (Resubmissions only – maximum 2 pages)

Research Plan (maximum 3 pages)

Specific Aims

Project Timeline

Relevance to Maternal and Child Health

Background and Significance

Preliminary Studies (if available)

Research Design and Methods

Included human subject research feasibility (if applicable)

Contacted SCH Clinical Research Support Office (if applicable)

Career Development

Potential Pitfalls and Contingency Plans

Future Steps

Appendix (Figures and References) (maximum 3 pages)

Supporting Documents

Applicant Information

NIH Biosketch (maximum 5 pages per person)

Personal Statement (1/2 page)

Division Chief or Department Chair Nomination Letter with attestation of 75% protected research time (maximum 1 page)

Supervisor/ Primary Research Mentor Information

Mentor support form completed online

NIH Biosketch (maximum 5 pages per person)

Non-Primary Mentor Information (if applicable)

Letter of Support

NIH Biosketch (maximum 5 pages per person)

Co-Investigator/Collaborator Information (if applicable)

Letter(s) of Support

NIH Biosketch (maximum 5 pages per person)

IRB Approval (if applicable)

Confirmation of IRB application submission and date (mm/dd/yy) of the scheduled IRB review meeting

IRB approval letter included if IRB has already been approved

Proposal is exempt from human subject research