

# Program Announcement

for the

Defense Health Program

Department of Defense

Congressionally Directed Medical Research Programs

## Neurofibromatosis Research Program

### Clinical Trial Award

**Funding Opportunity Number: W81XWH-14-NFRP-CTA**

**Catalog of Federal Domestic Assistance Number: 12.420**

#### SUBMISSION AND REVIEW DATES AND TIMES

- **Pre-Application Deadline:** 5:00 p.m. Eastern time (ET), July 10, 2014
- **Application Submission Deadline:** 11:59 p.m. ET, July 24, 2014
- **End of Application Verification Period:** 5:00 p.m. ET, July 29, 2014
- **Peer Review:** September 2014
- **Programmatic Review:** November 2014

***Change for Fiscal Year 2014:*** *The CDMRP eReceipt System has been replaced with the electronic Biomedical Research Application Portal (eBRAP). Principal Investigators and organizational representatives should register in eBRAP as soon as possible. All pre-applications must be submitted through eBRAP. In addition, applications submitted through Grants.gov will now be available for viewing, modification, and verification in eBRAP prior to the end of the application verification period.*

***This Program Announcement/Funding Opportunity is one of two documents with instructions to prepare and submit an application for this funding opportunity. The second document, the General Application Instructions, is available for downloading from Grants.gov.***

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## **I. FUNDING OPPORTUNITY DESCRIPTION**

### **A. Program Description**

Applications to the Fiscal Year 2014 (FY14) Neurofibromatosis Research Program (NFRP) are being solicited by the U.S. Army Medical Research Acquisitions Activity (USAMRAA). The NFRP was initiated in 1996 to provide support for research of exceptional scientific merit that promotes the understanding, diagnosis, and treatment of neurofibromatosis (NF) including NF type 1 (NF1) and type 2 (NF2) and schwannomatosis. Appropriations for the NFRP from FY96 through FY13 totaled \$257.85 million (M). The FY14 appropriation is \$15M.

### **B. FY14 NFRP Vision and Areas of Emphasis**

The vision of the FY14 NFRP is to decrease the clinical impact of NF. Toward this end, the NFRP seeks to support innovative, high-impact research that will foster new directions for and address neglected issues in NF research; sponsor multidisciplinary and multi-institutional collaborations that will bring new perspectives to the field; promote translational and clinical studies to move promising ideas from bench to bedside; and develop a balanced portfolio of meritorious research related to all aspects of NF1, NF2, and schwannomatosis.

**Areas of Emphasis:** The FY14 NFRP strongly encourages research applications that specifically address the critical needs of the NF community in one or more of the following Areas of Emphasis:

- Health services research for NF (see definition below)
- Heterogeneity of neurofibromas and other NF-related tumors
- Manifestations of NF post-adolescence, for example:
  - Cutaneous and subcutaneous neurofibromas
  - Vertebral dysplasia and related complications, including dural ectasia
  - Vascular abnormalities, including renal artery stenosis, moyamoya, aneurysm, and accelerated atherosclerosis
- Mechanisms of pain
- Novel disease markers for NF using genomics, epigenetics, systems biology, metabolomics, or other similar approaches
- Target identification and drug discovery for the treatment of NF

If the proposed research project does not address one of the FY14 Areas of Emphasis, justification that the proposed research project addresses an important problem related to NF research and/or patient care should be provided.

**Definition of health services research:** Health services research studies the access, costs, and quality of health care for individuals, families, organizations, institutions, communities, and populations. It is a multidisciplinary field of scientific investigation, including basic and applied research, that examines how social factors, financing systems, organizational structures and

functions, health technologies, and personal behaviors affect access to health care, the quality and cost of health care, and, ultimately, our health, well-being, and quantity and quality of life. The goals are to identify the most effective ways to organize, manage, finance, and deliver high-quality care, reduce medical errors, and improve patient safety. For more information, multiple resources are available including “Health Services Research: Scope and Significance,” from the NIH publication *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*, found online at <http://www.ncbi.nlm.nih.gov/books/NBK2660/>.

**NFRP Research Resources Initiative:** Resources developed through NFRP funding that are available to the scientific community can be found at <http://cdmrp.army.mil/nfrp/resources/nfrpresources>. Investigators are urged to leverage and contribute to these resources and include a sharing and distribution plan in the application for data and resources generated during the performance of the proposed research project. For more guidance on data sharing, refer to the General Application Instructions, Appendix 4, Section L.

### **C. Award Information**

The NFRP Clinical Trial Award mechanism was first offered in FY99. Since then, 40 Clinical Trial Award applications have been received, and 11 have been recommended for funding.

The NFRP Clinical Trial Award supports the rapid implementation of clinical trials with the potential to have a major impact on the treatment or management of NF. Clinical trials may be designed to evaluate promising new products, pharmacologic agents (drugs or biologics), devices, clinical guidance, and/or emerging approaches and technologies. Proposed projects may range from small proof-of-concept (i.e., pilot, first in human, or Phase 0) trials to demonstrate feasibility or inform the design of more advanced trials, through large-scale trials to determine efficacy in relevant patient populations.

***Funding from this award mechanism must support a clinical trial and may not be used for preclinical research studies.*** A clinical trial is defined as a prospective accrual of human subjects where an intervention (e.g., device, drug, biologic, surgical procedure, rehabilitative modality, behavioral intervention, or other) is tested on a human subject for a measurable outcome with respect to exploratory information, safety, effectiveness, and/or efficacy. This outcome represents a direct effect on the human subject of that intervention or interaction. Principal Investigators (PIs) seeking funding for a preclinical research project should consider one of the other award mechanisms/funding opportunities being offered. The term “human subjects” is used in this Program Announcement/Funding Opportunity to refer to individuals who will be recruited for or who will participate in the proposed clinical trial. For more information, a Human Subject Resource Document is provided at <https://ebrap.org/eBRAP/public/Program>

***For Pilot trials inclusion of scientific rationale and/or preliminary data relevant to the proposed pilot clinical trial is required.***

***For Phase I, II trials, scientific rationale and preliminary data relevant to the proposed clinical trial are required.***

If the clinical trial involves the use of a drug that has not been approved by the U.S. Food and Drug Administration (FDA) for the proposed investigational use, then an Investigational New Drug (IND) application to the FDA that meets all requirements under the Code of Federal Regulations, Title 21, Part 312 (21 CFR 312) may be required and must be submitted to the FDA ***prior to the application submission deadline***. If the investigational product is a device, evidence that an Investigational Device Exemption (IDE) application that meets all requirements under 21 CFR 812 has been submitted to the FDA ***prior to the application submission deadline***, or that the device is exempt from an IDE, is required. Documentation of approval of the IND or IDE must be obtained and submitted to the CDMRP Help Desk ([help@eBRAP.org](mailto:help@eBRAP.org)) ***prior to Programmatic Review***; otherwise, the Government reserves the right to withdraw the application.

**The following are important aspects of submission for the Clinical Trial Award:**

- The proposed clinical trial is expected to begin no later than 6 months after the award date, including the time required for regulatory review and approval processes.
- The application should include a clearly articulated statistical analysis plan appropriate to the phase of the clinical trial, appropriate statistical expertise, and a power analysis reflecting sample size projections that will clearly answer the objectives of the study.
- The application must demonstrate documented availability and accessibility of the drug/compound, device, and/or other materials needed, e.g., a letter from the manufacturer assuring an adequate supply of the agent (and placebo, if necessary).
- The application must demonstrate documented availability of, and access to, a suitable patient population that will support a meaningful outcome for the study. The PI should discuss how accrual goals will be achieved and how standards of care may impact the study population.
- The application must include, as appropriate, a study coordinator(s) who will guide the clinical protocol through the local Institutional Review Board (IRB) of record and other regulatory approval processes, coordinate activities from all sites participating in the clinical trial, and coordinate participant accrual.
- The application should include a transition plan (including potential funding and resources) showing how the product will progress to the next clinical trial phase and/or delivery to the market after the successful completion of the NFRP Clinical Trial Award.
- The application should clearly demonstrate strong institutional support and commitment.
- The proposed clinical trial design should include clearly defined and appropriate endpoints, and follow Good Clinical Practice (GCP) guidelines.
- The application should include a clearly articulated clinical monitoring plan, outlining how the study will be monitored for GCP compliance.
- The application should include a clearly articulated data management plan, and use of an appropriate database to safeguard and maintain the integrity of the data.
- The application should include a clearly articulated safety management plan, outlining how safety pharmacovigilance will be conducted as applicable.
- The application should acknowledge the commitment to filing the study in the National Institutes of Health (NIH) clinical trials registry, [www.clinicaltrials.gov](http://www.clinicaltrials.gov).

**Multi-Institutional Clinical Trials:** If the proposed clinical trial is multi-institutional, plans for communication and data transfer between the collaborating institutions, as well as how specimens and/or imaging products obtained during the study will be handled, should be included in the appropriate sections of the application. A separate intellectual and material property plan agreed upon by all participating institutions is also required for multi-institutional clinical trials.

**Use of Human Subjects and Human Anatomical Substances:** All Department of Defense (DoD)-funded research involving new and ongoing research with human subjects and human anatomical substances must be reviewed and approved by the U.S. Army Medical Research and Materiel Command (USAMRMC) Office of Research Protections (ORP), Human Research Protection Office (HRPO), in addition to the local IRB of record. Local IRB approval at the time of submission is NOT required. The HRPO is mandated to comply with specific laws and directives governing all research involving human subjects that is supported by the DoD. These laws and directives will require information in addition to that supplied to the IRB. Allow a minimum of 2-3 months for regulatory review and approval processes. Refer to the General Application Instructions, Appendix 6, for more information.

*The Congressionally Directed Medical Research Programs (CDMRP) intends that data and research resources generated under awards funded by this Program Announcement/Funding Opportunity be made available to the research community (which includes both scientific and consumer advocacy communities) and to the public at large. For additional guidance, refer to the General Application Instructions, Appendix 4, Section L.*

#### **D. Eligibility Information**

- PIs must be *at or above* the level of Assistant Professor (or equivalent).
- Cost sharing/matching is not an eligibility requirement.
- Eligible investigators must apply through an organization. Organizations eligible to apply include national, international, for-profit, non-profit, public, and private organizations.
- Refer to the General Application Instructions, Appendix 1, for general eligibility information.

#### **E. Funding**

- The maximum period of performance is **4** years.
- The maximum allowable direct costs for the entire period of performance are **\$900,000** plus indirect costs.
- All direct and indirect costs of any subaward (subgrant or subcontract) must be included in the total direct costs of the primary award.
- The applicant may request the entire maximum funding amount for a project that may have a period of performance less than the maximum 4 years.

- Regardless of the period of performance proposed, the applicant may not exceed the maximum allowable direct costs. Indirect costs shall be proposed in accordance with the organization's negotiated rate agreement.

Refer to the General Application Instructions, Section II.C.4., for budget regulations and instructions for the Research & Related Budget. ***For all federal agencies or organizations collaborating with federal agencies, budget restrictions apply as are noted in Section II.C.4. of the General Application Instructions.***

For this award mechanism, direct costs:

May be requested for (not all-inclusive):

- Salary
- Research-related subject costs
- Clinical research costs
- Research supplies
- Equipment
- Travel between collaborating organizations
- Travel costs of up to \$1,800 per year to attend scientific/technical meetings

Shall not be requested for:

- Preclinical research studies

Intramural (DoD), other federal agency, and extramural investigators are encouraged to apply to this Program Announcement/Funding Opportunity. An intramural investigator is defined as a DoD military or civilian employee working within a DoD laboratory or medical treatment facility, or working in a DoD activity embedded within a civilian medical center. Intramural applicants and collaborators are reminded to coordinate receipt and commitment of funds through their respective resource managers. It is permissible for an intramural investigator to be named as a collaborator on an application submitted by an extramural investigator. ***In such cases, the extramural investigator must include a letter from the intramural collaborator's Commander or Commanding Officer that authorizes the involvement of the intramural collaborator.***

As required of all applicants to this Program Announcement/Funding Opportunity, if PIs from federal agencies submit applications, they must submit through Grants.gov. Therefore, federal applicants must be familiar with Grants.gov requirements, including the need for an active System for Award Management (SAM) registration and a Data Universal Numbering System (DUNS) number. Refer to Appendix 3 of the General Application Instructions for further information regarding Grants.gov requirements.

Awards to extramural organizations will consist solely of assistance agreements (Cooperative Agreements and Grants). Awards to intramural agencies and other federal agencies will be executed through the Military Interdepartmental Purchase Request (MIPR) or Funding

Authorization Document (FAD) process. Direct transfer of funds from the recipient to a federal agency is not allowed except under very limited circumstances. Refer to the General Application Instructions, Section II.C.4. Research & Related Budget, for additional information on budget considerations for applications involving federal agencies.

***The CDMRP expects to allot approximately \$2.88M of the \$15M FY14 appropriation to fund approximately 2 Clinical Trial Award applications, depending on the quality and number of applications received. Funding of applications received in response to this Program Announcement/Funding Opportunity is contingent upon the availability of federal funds for this program.***

## II. SUBMISSION INFORMATION

Submission is a two-step process requiring both (1) pre-application submission through the electronic Biomedical Research Application Portal (eBRAP) (<https://eBRAP.org/>) and (2) application submission through Grants.gov (<http://www.grants.gov/>).

**New for FY14:** *The CDMRP has replaced its eReceipt System with eBRAP.* Submission remains a two-step process requiring both pre-application and application submission.

PIs must be registered in eBRAP in order to submit a pre-application and receive notification of the status of a pre-application or application. A key feature of eBRAP is that an organization's representatives and PIs are able to view and modify the Grants.gov application submissions associated with them, but only if the organization, Business Officials, and PIs are registered and affiliated to the organization in eBRAP (see *eBRAP User Guide* at <https://ebrap.org/eBRAP/public/UserGuide.pdf>). Upon completion of an organization's registration in eBRAP and approval by the CDMRP Help Desk, the organization name will be displayed in eBRAP to assist the organization's business officials and PIs as they register.

**Note:** Submission of either the pre-application to eBRAP or application to Grants.gov does not require registering an organization and affiliating its Business Officials and PIs in eBRAP; however, the ability to view and modify the Grants.gov application in eBRAP is contingent upon the registration and affiliation. ***Application viewing, modification, and verification in eBRAP is strongly recommended, but not required. The Project Narrative and Budget cannot be changed after the application submission deadline. Any other application component cannot be changed after the end of the application verification period.*** If verification is not completed by the end of the application verification period, the application will be reviewed as submitted through Grants.gov or may be subject to administrative rejection (see [Section IV.A., Rejection](#)).

Submission of applications that are essentially identical or propose essentially the same research project to different funding opportunities within the same program and fiscal year is prohibited and will result in administrative withdrawal of the duplicative application.

## A. Where to Obtain the Application Package

To obtain the complete application package, including all required forms, perform a Grants.gov (<http://www.grants.gov/>) basic search using the Funding Opportunity Number: W81XWH-14-NFRP-CTA.

## B. Pre-Application Submission and Content Form

All pre-application components must be submitted by the PI through eBRAP (<https://eBRAP.org/>).

PIs and organizations identified in the pre-application should be the same as those intended for the subsequent application submission. If any changes are necessary after submission of the pre-application, the PI must contact the CDMRP Help Desk at [help@eBRAP.org](mailto:help@eBRAP.org) or 301-682-5507.

The pre-application consists of the following components, which are organized in eBRAP by separate tabs (refer to the General Application Instructions, Section II.B., for additional information on pre-application submission):

- **Application Information – Tab 1**

- **Application Contacts – Tab 2**

- It is recommended that PIs identify an Alternate Submitter in the event that assistance with pre-application submission is needed.

- **Collaborators and Conflicts of Interest – Tab 3**

FY14 NFRP Integration Panel (IP) members should not be involved in any pre-application or application. For questions related to IP members and pre-applications or applications, refer to [Section IV.C., Withdrawal](#), or contact the CDMRP at [help@eBRAP.org](mailto:help@eBRAP.org) or 301-682-5507.

- **Required Files – Tab 4**

**Letter of Intent (LOI) (one-page limit):** Provide a brief description of the research to be conducted. LOIs are used for program planning purposes only (e.g., reviewer recruitment) and will not be reviewed during either the peer or programmatic review sessions.

- **Submit Pre-Application – Tab 5**

This tab must be completed for the pre-application to be accepted and processed.

## C. Application Submission Content and Forms

Each application submission must include the completed application package of forms and attachments provided in Grants.gov for this Program Announcement/Funding Opportunity. The application package is submitted by the Authorized Organizational Representative through the Grants.gov portal (<http://www.grants.gov/>).

**New for FY14:** *Applications submitted through and validated by Grants.gov will be retrieved and processed by eBRAP to allow for review, modification, and verification.* The PI and organizational representatives will receive an email request from eBRAP to review, modify, and verify the application submitted to Grants.gov. During this verification period, the PI may upload missing files (excluding those listed in [Section IV.A., Rejection](#)), replace files, and re-categorize files. These modifications must be completed by the end of the verification period.

**Note:** *Changes to either the Project Narrative or Budget are not allowed in eBRAP;* if such changes are required, the entire application package must be submitted through Grants.gov as a “Changed/Corrected Application” with the Previous Grants.gov Tracking ID *prior to the application submission deadline (which occurs earlier than the end of the application verification period).*

**Grants.gov application package components:** For the Clinical Trial Award, the Grants.gov application package includes the following components (refer to the General Application Instructions, Section II.C., for additional information on application submission):

1. **SF 424 (R&R) Application for Federal Assistance Form:** Refer to the General Application Instructions, Section II.C., for detailed information.
2. **Attachments Form**

*The Project Narrative is NOT the formal clinical trial protocol. Instead, all essential elements of the proposed clinical trial necessary for scientific review must be included as directed in Attachment 1 (the Project Narrative) and Attachments 6-8 described below. Failure to submit these attachments as part of the application package will result in rejection of the entire application.*

- **Attachment 1: Project Narrative (20-page limit):** Upload as “ProjectNarrative.pdf.” The page limit of the Project Narrative applies to text and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings, etc.) used to describe the project. Inclusion of URLs that provide additional information to expand the Project Narrative and could confer an unfair competitive advantage is prohibited and will result in administrative withdrawal of the application.

Describe the proposed project in detail using the outline below.

- **Background:**
  - Describe in detail the rationale for the study and include a literature review, preliminary studies, and preliminary data that led to the development of the proposed clinical trial.
  - Provide a summary of relevant clinical trials and distinguish how the proposed clinical trial differs from other relevant or recently completed clinical trials.
  - Include a discussion of any current clinical use of the intervention under investigation, and/or details of its study in clinical trials for other indications

(as applicable). This section should establish the relevance of the study and explain the applicability of the proposed findings.

- **Objectives/Specific Aims/Hypotheses:** Identify the phase of the proposed clinical trial and provide a description of the purpose and objectives of the study with detailed specific aims and/or study questions/hypotheses.
- **Study Design:** Describe the type of study to be performed (e.g., prospective, randomized, controlled) and outline the proposed methodology in sufficient detail to show a clear course of action. Describe potential challenges and alternative strategies where appropriate.
  - Identify the intervention to be tested and describe the projected outcomes.
  - Define the study variables and describe how they will be measured. Include a description of appropriate controls and the endpoints to be tested.
  - Describe the methods that will be used to recruit a sample of human subjects from the accessible population (e.g., convenience, simple random, stratified random).
  - Clearly describe the tissue or tumor type to be studied, where applicable (e.g., encapsulated versus diffuse plexiform neurofibroma).
  - Describe the human subject-to-group assignment process (e.g., randomization, block randomization, stratified randomization, age-matched controls, alternating group, or other procedures), if applicable. Explain the specific actions to accomplish the group assignment (e.g., computer assignment, use of table of random numbers).
  - If using psychometric measures, describe their reliability and validity.
- **Statistical Plan and Data Analysis:** Describe the statistical model and data analysis plan with respect to the study objectives. Specify the approximate number of human subjects to be enrolled. If multiple study sites are involved, state the approximate number to be enrolled at each site. Include a complete power analysis to demonstrate that the sample size is appropriate to meet the objectives of the proposed clinical trial. If a subpopulation of a recruited sample population will be used for analysis, complete a statistical analysis to ensure appropriate power can be achieved within the subpopulation study.
- **Attachment 2: Supporting Documentation.** Start each document on a new page. Combine and upload as a single file named “Support.pdf.” If documents are scanned to pdf, the lowest resolution (100 to 150 dpi) should be used. ***There are no page limits for any of these components unless otherwise noted. Include only those components described below; inclusion of items not requested may result in the removal of those items or administrative withdrawal of the application.***
  - **References Cited:** List the references cited (including URLs if available) in the Project Narrative using a standard reference format that includes the full citation (i.e., author[s], year published, title of reference, source of reference, volume, chapter, page numbers, and publisher, as appropriate).

- List of Abbreviations, Acronyms, and Symbols: Provide a list of abbreviations, acronyms, and symbols.
- Facilities, Existing Equipment, and Other Resources: Describe the facilities and equipment available for performance of the proposed project and any additional facilities or equipment proposed for acquisition at no cost to the award. Indicate whether or not Government-furnished facilities or equipment are proposed for use. If so, reference should be made to the original or present Government award under which the facilities or equipment items are now accountable. There is no form for this information.
- Publications and/or Patent Abstracts (five-document limit): Include relevant publication URLs and/or patent abstracts. If publications are not publicly available, then a copy/copies of the published manuscript(s) must be included in Attachment 2. Extra items will not be reviewed.
- Letters of Organizational Support: Provide a letter (or letters, if applicable), signed by the Department Chair or appropriate organization official, confirming the laboratory space, equipment, and other resources available for the proposed clinical trial.
- Letters of Collaboration (if applicable): Provide a signed letter from each collaborating individual or organization that will demonstrate that the PI has the support or resources necessary for the proposed clinical trial.
- Intellectual Property
  - Background and Proprietary Information (if applicable): All software and data first produced under the award are subject to a federal purpose license in accordance with applicable DoD Grant and Agreement Regulations (DoDGAR) requirements. Provide a list of all background intellectual property to be used in the project. Identify any proprietary information that will be provided to the Government and indicate whether the applicant will require a waiver of the federal purpose license.
  - Intellectual and Material Property Plan (if applicable): Provide a plan for resolving intellectual and material property issues among participating organizations.
- Data and Research Resources Sharing Plan: Describe how data and resources generated during the performance of the proposed clinical trial will be shared with the research community. Refer to the General Application Instructions, Appendix 4, Section L, for more information about the CDMRP expectations for making data and research resources publicly available.
- **Attachment 3: Technical Abstract (one-page limit):** Upload as “TechAbs.pdf.”  
 Technical abstracts should be written using the outline below. The technical abstract is used by all reviewers. Of particular importance, programmatic reviewers do not have access to the full application and therefore rely on the technical abstract for appropriate description of the proposed clinical trial’s key aspects. Clarity and completeness within the space limits of the technical abstract are highly important.

- Background: Present the ideas and reasoning behind the proposed clinical trial.
- Objective/Hypothesis: State the objective/hypothesis to be tested. Provide evidence or rationale that supports the objective/hypothesis.
- Specific Aims: State the specific aims of the proposed clinical trial.
- Study Design: Briefly describe the study design including appropriate controls. If tumors or derived cell lines will be studied, the name and definition of the materials should be included (e.g., name of the cell or pathological classification of the tissue).
- Clinical Impact: Briefly describe how the proposed project will have an impact on the treatment or management of NF.

- **Attachment 4: Lay Abstract (one-page limit):** Upload as “LayAbs.pdf.”

Lay abstracts should be written using the outline below. The lay abstract is used by consumer peer reviewers along with other components of the application package.]

- Clearly describe, in a manner readily understood by lay persons, the rationale and objective for the proposed clinical trial.
    - Do not duplicate the technical abstract.
  - Describe the ultimate applicability and impact of the research.
    - What types of patients will it help, and how will it help them?
    - What are the potential clinical applications, benefits, and risks?
    - What are the likely contributions of the proposed clinical trial to advancing the treatment or management of NF?
- **Attachment 5: Statement of Work (SOW) (three-page limit):** Upload as “SOW.pdf.” Refer to the General Application Instructions, Section II.C.2., for detailed guidance on creating the SOW.

The suggested SOW format and examples specific to different types of research projects are available on the eBRAP “Program Announcement and Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>). For the Clinical Trial Award mechanism, use the SOW format example titled “SOW for Clinical Research (including Trials, Special Populations).” The SOW must be in PDF format prior to attaching.

- **Attachment 6: Human Subject Recruitment and Safety Procedures (no page limit):** Upload as “HumSubProc.pdf.” The Human Subject Recruitment and Safety Procedures attachment should include the components listed below.

- a. **Study Population:** Describe the target population (to whom the study findings will be generalized) and the nature, approximate number, and pertinent demographic characteristics of the accessible population at the study site (population from whom the sample will be recruited/drawn). Demonstrate that the research team has access to the proposed study population. Furthermore, discuss past efforts in recruiting human subjects from the target population for previous clinical trials (if applicable). Address any potential barriers to accrual

and plans for addressing unanticipated delays. Include justification of any age, race, ethnicity, or sex limitations provided.

- b. Inclusion/Exclusion Criteria:** List the inclusion and exclusion criteria for the proposed clinical trial. Inclusion/exclusion criteria should take into consideration the specific risk profile of the studies to be conducted and the standard of care for that patient population. Provide detailed justification for exclusions.

***Inclusion of Women and Minorities in Study.*** Consistent with the Belmont Report, “Ethical Principles and Guidelines for the Protection of Human Subjects,” and Congressional legislation, special attention is given to inclusion of women and/or minorities in studies funded or supported by the USAMRMC. This policy is intended to promote equity both in assuming the burdens and in receiving the benefits of human subjects research. Include an appropriate justification if women and/or minorities will be excluded from the clinical trial.

- c. Description of the Recruitment Process:** Explain methods for identification of potential human subjects (e.g., medical record review, obtaining sampling lists, health care provider identification).
- Describe the recruitment process in detail. Address who will identify potential human subjects, who will recruit them, and what methods will be used to recruit them.
  - Include a detailed description of and justification for the compensation plan if the human subjects will be compensated for participation in the proposed clinical trial.
  - Describe the recruitment and advertisement materials. The recruitment materials should not be coercive or offer undue inducements and should accurately reflect the proposed clinical trial.
- d. Description of the Informed Consent Process:** Specifically describe the plan for obtaining informed consent from human subjects.
- ***For the proposed study, provide a draft, in English, of the Informed Consent Form.***
  - Identify who is responsible for explaining the proposed clinical trial, answering questions, and obtaining informed consent. Include a plan for ensuring that human subjects’ questions will be addressed during the consent process and throughout the clinical trial.
  - Include information regarding the timing and location of the consent process.
  - Address issues relevant to the mental capacity of the potential human subject (e.g., altered capacity due to administration of any mind-altering substances such as tranquilizers, conscious sedation or anesthesia, brain injury, stress/life situations, or human subject age), if applicable.

- Address how privacy and time for decision making will be provided and whether or not the potential human subject will be allowed to discuss the proposed clinical trial with anyone before making a decision.
  - Consider the need for obtaining ongoing consent or for re-assessing capacity over the course of a long-term study and describe any relevant procedures to assure continued consent.
  - Describe the plan for the consent of the individual's Legally Authorized Representative (LAR) to be obtained prior to the human subject's participation in the proposed clinical trial. State law defines who may act as the LAR. The local IRB of record should be consulted for guidance regarding who can serve as LAR for research at the study site. Note: The PI must describe a clear intent to benefit for human subjects who cannot give their own consent to participate in the proposed clinical trial to be in compliance with Title 10 United States Code Section 980 (10 USC 980) (<http://www.gpo.gov/fdsys/pkg/USCODE-2011-title10/pdf/USCODE-2011-title10-subtitleA-partII-chap49-sec980.pdf>). If applicable, please refer to the General Application Instructions, Appendix 5, for more information.
  - **Assent.** If minors or other populations that cannot provide informed consent are included in the proposed clinical trial, a plan to obtain assent (agreement) from those with capacity to provide it, or a justification for a waiver of assent, should be provided. PIs should consult with their local IRB to identify the conditions necessary for obtaining assent.
- e. Screening Procedures:** List and describe any evaluations (e.g., laboratory procedures, history, or physical examination) that are required to determine eligibility/suitability for study participation and the diagnostic criteria for entry. Please note that some screening procedures may require a separate consent or a two-stage consent process. Informed consent must be obtained prior to initiation of any procedures for the purpose of determining eligibility.
- f. Risks/Benefits Assessment:**
- **Foreseeable risks:** Clearly identify all study risks, including potential safety concerns and adverse events. Study risks include any risks that the human subject is subjected to as a result of participation in the clinical trial. Consider psychological, legal, social, and economic risks as well as physical risks. If the risks are unknown, this should be stated. If applicable, any potential risk to the study personnel should be identified.
  - **Risk management and emergency response:**
    - Describe how safety surveillance and reporting to the IRB and FDA (if applicable) will be managed and conducted.
    - Describe all safety measures to minimize and/or eliminate risks to human subjects and study personnel or to manage unpreventable risks. Include safeguards and planned responses such as dose reduction or stopping criteria based on toxicity grading scales or other predetermined alert values.

- Discuss the overall plan for provision of emergency care or treatment for an adverse event for study-related injuries, to include who will be responsible for the cost of such care.
- Address any special precautions to be taken by the human subjects before, during, and after the proposed clinical trial (e.g., medication washout periods, dietary restrictions, hydration, fasting, pregnancy prevention).
- Describe any special care (e.g., wound dressing assistance, transportation due to side effects of study intervention impairing ability to drive) or equipment (e.g., thermometers, telemedicine equipment) needed for human subjects enrolled in the proposed clinical trial.
- **Potential benefits:** Describe known and potential benefits of the proposed clinical trial to the human subject, a specific community, or society.
- **Attachment 7: Intervention (no page limit):** Upload as “Intervention.pdf.” The Intervention attachment should include the components listed below.
  - a. **Description of the Intervention:** As applicable, the description of the intervention should include the following components: complete name and composition, storage and handling information, source, dose, schedule, administration route, washout period, duration of the intervention, and concomitant medications allowed.
 

Summarize key preclinical pharmacological findings, dosage studies, and other clinical studies (if applicable) that examine the safety of the intervention.
  - b. **Availability of Intervention:** If the proposed study involves use of a commercially produced investigational drug, device, or biologic, provide a letter of commitment from the commercial entity indicating availability of the product for the duration of the study, support for the proposed phase of research, and support for the indication to be tested.
  - c. **Study Procedures:** Describe the interaction with the human subject to include the study intervention that he/she will experience. Provide sufficient detail in chronological order for a person uninvolved in the study to understand what the human subject will experience. Provide a schedule (e.g., flowchart or diagram) of study evaluations and follow-up procedures. Discuss how compliance with Good Laboratory Practices (GLP), Good Manufacturing Practices (GMP), and other regulatory considerations will be established, monitored, and maintained, as applicable.
  - d. **Clinical Monitoring Plan:** Describe how the study will be conducted by and monitored for ICH E6 (International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use) GCP compliance, by an independent clinical trial monitor (or clinical research associate). The monitoring plan should describe the types of monitoring visits to be conducted, the intervals (based on level of risk), how corrective actions will be reported to the Sponsor and PI, and how they will be corrected and prevented by the clinical trial site/PI.

- **Attachment 8: Data Management (no page limit):** Upload as “Data\_Manage.pdf.” The Data Management attachment should include the components listed below.
  - a. **Data Management:** Describe all methods used for data collection to include the following:
    - **Identifiers:** Describe the unique identifiers or specific code system to be used to identify human subjects, if applicable.
    - **Confidentiality:**
      - Explain measures taken to protect the privacy of study human subjects and maintain confidentiality of study data. Strategies to protect the privacy and confidentiality of study records, particularly those containing identifying information, should be addressed.
      - Address who will have access to study records, data, and specimens, including an acknowledgment that representatives of USAMRMC are eligible to review study records.
      - Address requirements for reporting sensitive information to state or local authorities.
    - **Data capture, verification, and disposition:** Describe how data will be captured and verified. Describe where data (both electronic and hard copy) will be stored, who will keep the data, how the data will be stored, the process for locking the database at study completion, and the length of time data will be stored. Describe the proposed database, how it will be developed and validated, and its capability to safeguard and maintain the integrity of the data. For FDA-regulated studies, compliance with 21 CFR 11 is required.
    - **Sharing study results:** In cases where the human subject could possibly benefit medically or otherwise from the information, explain whether or not the results of screening and/or study participation will be shared with human subjects or their primary care provider, to include results from any screening or diagnostic tests performed as part of the proposed clinical trial.
  - b. **Laboratory Evaluations:**
    - **Specimens to be collected, schedule, and amount:** All specimens that will be collected for study purposes must be clearly stated. The collection schedule and amount of material collected must also be clearly described.
    - **Evaluations to be made:** Describe all evaluations that will be made for study purposes. Explain how the results of laboratory evaluations will be used to meet the objectives of the proposed clinical trial (or to monitor safety of human subjects).
    - **Storage:** Describe specimen storage, to include location of storage, how long specimens will be stored, any special conditions required, labeling, and disposition. Outline the plan to store specimens for future use to include

considerations for informed consent and providing human subjects with an opportunity to decline participation in the proposed clinical trial.

- **Labs performing evaluations and special precautions:** Identify the laboratory performing each evaluation, as well as any special precautions that should be taken in handling the samples. Special precautions that should be taken by the human subject before, during, or after the laboratory procedure should be clearly defined. If transport of samples is required, describe provisions for ensuring proper storage during transport.
- **Attachment 9: Study Personnel and Organization (no page limit):** Start each document on a new page. Combine into one document and upload as “Personnel.pdf.” The Study Personnel and Organization attachment should include the components listed below.
  - a. **Organizational Chart:** Provide an organizational chart identifying key members of the study team including institution/center/department and name each person’s position on the project. A medical monitor (external to the study and not reimbursed by the study) and study coordinator(s) should be included as appropriate to the size and phase of the study. While there is no specified format for this information, a table(s) or diagram is recommended.
  - b. **Study Personnel Description:** Briefly describe the roles of the individuals listed in the organizational chart on the project. Describe relevant experience and qualifications that demonstrate appropriate expertise for the given role.
  - c. **Study Management Plan:** Provide a plan for ensuring the standardization of procedures among staff and across sites (if applicable). If the proposed clinical trial is multi-institutional, plans for communication and data transfer between the collaborating institutions, as well as how data, specimens, and/or imaging products obtained during the study will be handled, should be included. Provide a plan for real-time communication among collaborating institutions (if applicable).
- **Attachment 10: Surveys, Questionnaires, and Other Data Collection Instruments, if applicable (no page limit):** Upload as “Surveys.pdf.” The Surveys, Questionnaires, and Other Data Collection Instruments attachment should include a copy of the most recent version of surveys, questionnaires, data collection forms, rating scales, interview guides, or other instruments. For each instrument, describe how the information collected is related to the objectives of the study.
- **Attachment 11: Impact Statement (one-page limit).** Upload as “Impact.pdf.”
  - Explain how the proposed clinical trial addresses one or more of the FY14 NFRP Areas of Emphasis, or, if the project does not address an Area of Emphasis, provide justification that the proposed clinical trial addresses an important problem in NF patient care.
  - Identify the volunteer population(s) that will participate in the proposed intervention.

- Describe the short-term impact: Detail the anticipated outcome(s) that will be directly attributed to the results of the proposed research.
- Describe the long-term impact: Explain the anticipated long-term gains from the proposed research project, including how the new understanding may ultimately contribute to the goal of advancing NF patient care.
- Describe any relevant controversies or treatment issues that will be addressed by the proposed clinical trial.
- Describe any potential issues that might limit the impact of the proposed clinical trial.
- Compare the proposed intervention to pharmacologic agents, devices, and/or clinical guidance currently available, if applicable.
- **Attachment 12: Transition Plan (one-page limit).** Upload as “Transition.pdf.” Provide information on the methods and strategies proposed to move the product to the next phase of clinical trials and/or delivery to the civilian or military market after successful completion of the award. The transition plan should include the components listed below.
  - Details of the funding strategy that will be used to bring the outcomes to the next level of clinical trials and/or delivery to the market (e.g., specific potential industry partners, specific funding opportunities to be applied for).
  - For knowledge products, a description of how the knowledge will be further developed, disseminated, and incorporated into clinical care.
  - A description of collaborations and other resources that will be used to provide continuity of development.
  - A brief schedule and milestones for bringing the outcome(s) to the next phase of clinical trials and/or delivery to the market.
  - A risk analysis for cost, schedule, manufacturability, and sustainability.
- **Attachment 13: IND/IDE Documentation:** If submitting multiple documents, start each document on a new page. Combine and upload as a single file named “IND-IDE.pdf.”
  - Complete the IND/IDE Documentation Form, which is available for download on the Full Announcement page for this Program Announcement/Funding Opportunity on Grants.gov.
  - For studies requiring an IND or IDE, provide the status of the FDA application (e.g., past the critical 30-day period, pending response to questions raised, on clinical hold). Inclusion of a copy of the FDA meeting minutes is encouraged but not required. If an IND or IDE is not required for the proposed clinical trial, provide evidence in the form of communication from the FDA or the IRB of record to that effect.

3. **Research & Related Senior/Key Person Profile (Expanded):** Refer to the General Application Instructions, Section II.C.3., for detailed information. *Note: Some of the items in this attachment may be made available for programmatic review.*
  - PI Biographical Sketch (four-page limit): Upload as “Biosketch\_LastName.pdf.”
  - PI Previous/Current/Pending Support (no page limit): Upload as “Support\_LastName.pdf.”
  - Key Personnel Biographical Sketches (four-page limit each): Upload as “Biosketch\_LastName.pdf.”
  - Key Personnel Previous/Current/Pending Support (no page limit): Upload as “Support\_LastName.pdf.”
4. **Research & Related Budget:** Refer to the General Application Instructions, Section II.C.4., for detailed information.
  - Budget Justification (no page limit): Upload as “BudgetJustification.pdf.”
5. **Project/Performance Site Location(s) Form:** Refer to the General Application Instructions, Section II.C.5., for detailed information.
6. **R & R Subaward Budget Attachment(s) Form (if applicable):** Refer to the General Application Instructions, Section II.C.6., for detailed information.

#### **D. Verification of Grants.gov Application in eBRAP**

For FY14, a new process has been initiated whereby organizational representatives and PIs can view their applications as submitted through Grants.gov and prior to peer review of the application. This will enable applicants to make modifications prior to scientific and programmatic evaluation of applications, provided the modifications are made by either the end of the application verification period or, for changes to the Project Narrative or Budget, by the application submission deadline.

After application submission to Grants.gov, eBRAP will retrieve and validate the application submission. eBRAP will notify the organizational representatives and PI via email and instruct them to log into eBRAP to review, modify, and verify the application. Files that fail eBRAP validation will be noted in both the email and in the Full Application Files tab. eBRAP does not validate the accuracy or completeness of content in the files. PIs are strongly encouraged to review all application components. If either the Project Narrative or the Budget fail eBRAP validation, an updated Grants.gov application package must be submitted via Grants.gov prior to the application submission deadline, which occurs earlier than the end of the application verification period. *The Project Narrative and Budget cannot be changed after the application submission deadline. Any other application component cannot be changed after the end of the application verification period.*

## **E. Submission Dates and Times**

All submission dates and times are indicated on the [title page](#) of this Program Announcement/Funding Opportunity. Pre-application and application submissions are required. Failure to meet either of these deadlines will result in application rejection.

## **F. Other Submission Requirements**

Refer to the General Application Instructions, Appendix 2, for detailed formatting guidelines.

All applications must be submitted through Grants.gov. Applicant organizations and all subrecipient organizations must have a DUNS number to submit applications to Grants.gov. The applicant organization must also be registered in the Entity Management functional area of the SAM with an “Active” status to submit applications through the Grants.gov portal. Refer to the General Application Instructions, Appendix 3, for information on Grants.gov requirements.

## **III. APPLICATION REVIEW INFORMATION**

### **A. Application Review and Selection Process**

All applicants are evaluated by scientists, clinicians, and consumer advocates using a two-tier review process. The first tier is peer review of applications against established criteria for determining technical merit. The second tier is a programmatic review that makes recommendations for funding to the Commanding General, U.S. Army Medical Research and Materiel Command (USAMRMC), based on (a) technical merit and (b) the relevance to the mission of the DoD and NFRP and to the specific intent of the award mechanism. The highestscoring applications from the first tier of review are not automatically recommended for funding. Additional information about the two-tier process used by the CDMRP can be found at <http://cdmrp.army.mil/about/fundingprocess>.

All CDMRP review processes are conducted confidentially to maintain the integrity of the merit-based selection process. Panel members sign a non-disclosure statement that application and evaluation information will not be disclosed outside the panel. Violations of confidentiality can result in the dissolving of a panel(s) and other corrective actions. In addition, personnel at the applicant or collaborating organizations are prohibited from contacting persons involved in the review process to gain protected evaluation information or to influence the evaluation process. Violations of these prohibitions will result in the administrative withdrawal of the organization’s application. Violations by panel members or applicants that compromise the confidentiality of the review process may also result in suspension or debarment from federal awards. Furthermore, the unauthorized disclosure of confidential information of one party to another third party is a crime in accordance with 18 USC 1905.

### **B. Application Review Process**

- 1. Peer Review:** To determine technical merit, all applications will be evaluated according to the following scored criteria, which are of equal importance:

- **Clinical Impact**
  - How well the application addresses one or more of the FY14 NFRP Areas of Emphasis and/or a critical problem in NF patient care.
  - To what extent the anticipated outcomes of the proposed clinical trial are relevant to individuals with NF.
  - How well the sample population represents the targeted patient population that might benefit from the proposed intervention.
  - How the potential outcomes of the proposed clinical trial will provide/improve the short-term benefits for individuals with NF.
  - How significantly the long-term benefits for implementation of the intervention may impact patient care and/or quality of life.
  - How well the intervention compares with currently available interventions and/or standards of care, if applicable.
  - To what extent the data and resources generated during the performance of the proposed clinical trial will be shared with the research community.
- **Intervention**
  - Whether there is evidence of support, indicating availability of the intervention from its source, for the duration of the proposed clinical trial (if applicable).
  - To what degree the intervention addresses the clinical need(s) described.
  - To what degree the PI has provided preliminary data to support the safety of the intervention.
  - How the intervention compares with currently available interventions and/or standards of care.
  - For investigator-sponsored INDs, whether there is evidence of appropriate institutional support, including capabilities to ensure monitoring as required by the FDA.
  - To what degree the data collection instruments (e.g., surveys, questionnaires), if applicable, are appropriate to the proposed clinical trial.
  - Whether measures are described to ensure the consistency of dosing of active ingredients for nutritional supplements (if applicable).
- **Research Strategy**
  - How well the scientific rationale for testing the intervention is supported by the preliminary data, critical review and analysis of the literature.
  - How well the study aims, hypotheses or objectives, experimental design, methods, data collection procedures, and analyses are designed to answer clearly the clinical objective.
  - How well the inclusion and randomization criteria meet the needs of the proposed clinical trial.
  - How well the exclusion criteria are justified.

- **Recruitment, Accrual, and Feasibility**
  - How well the PI addresses the availability of human subjects for the clinical trial and the prospect of their participation.
  - Whether the PI has demonstrated access to the proposed human subjects population.
  - To what degree the recruitment, informed consent, screening, and retention processes for human subjects will meet the needs of the proposed clinical trial.
  - How well the application identifies possible delays (e.g., slow accrual, attrition) and presents adequate contingency plans to resolve them.
  - To what extent the proposed clinical trial might affect the daily lives of the individual human subjects participating in the study (e.g., Will human subjects still be able to take their regular medications while participating in the clinical trial? Are human subjects required to stay overnight in a hospital?).
  - To what extent the proposed clinical trial is feasible as described.
- **Statistical Plan**
  - To what degree the statistical model and data analysis plan are suitable for the planned study.
  - How the statistical plan, including sample size projections and power analysis, is adequate for the study and all proposed correlative studies.
- **Transition Plan**
  - Whether the funding strategy described to bring the outcome(s) to the next level of clinical trials and/or delivery to the market is appropriate.
  - Whether appropriate collaborations and other resources for providing continuity of development are established and/or well described.
  - How the schedule and milestones for bringing the outcome(s) to clinical trial and/or delivery to the market are appropriate.
  - How well the potential risk analysis for cost, schedule, manufacturability, and sustainability is developed.
  - How well the application identifies intellectual property ownership, describes any appropriate intellectual and material property plan among participating organizations (if applicable), and addresses any impact of intellectual property issues on product development and subsequent Government access to products supported by this Program Announcement/Funding Opportunity.
- **Personnel and Communication**
  - Whether the composition of the study team is appropriate (e.g., study coordinator, statistician, licensed personnel to oversee patient care).
  - To what degree the study team's experience, expertise, and records of accomplishment are appropriate to successfully complete the proposed clinical trial (e.g., statistical expertise, expertise in the disease, and clinical studies).

- How the levels of effort of the study team members are appropriate for successful conduct of the proposed clinical trial.
- How well the logistical aspects of the proposed clinical trial (e.g., communication plan, data transfer and management, standardization of procedures) meet the needs of the proposed clinical trial.

In addition, the following unscored criteria will also contribute to the overall evaluation of the application:

- **Ethical Considerations**

- How the level of risk to human subjects is minimized and whether there is sufficient evidence of a monitoring plan that is appropriate for the level of risk.
- How well the evidence shows that the procedures are consistent with sound research design and, when appropriate, that these procedures are already in use for diagnostic or treatment purposes.
- To what degree privacy issues are appropriately considered.
- To what degree the process for seeking informed consent is appropriate and whether safeguards are in place for vulnerable populations.

- **Environment**

- To what degree the scientific environment, clinical setting, and the accessibility of institutional resources support the clinical trial at each participating center or institution (including collaborative arrangements).
- Whether there is evidence for appropriate institutional commitment from each participating institution.

- **Budget**

- Whether the budget is appropriate for the proposed clinical trial and within the limitations of this Program Announcement/Funding Opportunity.

- **Application Presentation**

- To what extent the writing, clarity, and presentation of the application components influence the review.

**2. Programmatic Review:** To make funding recommendations, the following equally considered criteria are used by programmatic reviewers:

**a. Ratings and evaluations of the peer reviewers**

**b. Relevance to the mission of the DHP and FY14 NFRP, as evidenced by the following:**

- Adherence to the intent of the award mechanism
- Program portfolio composition
- Programmatic relevance
- Relative impact

### **C. Recipient Qualification**

For general information on required qualifications for award recipients, refer to the General Application Instructions, Appendix 1.

### **D. Application Review Dates**

All application review dates and times are indicated on the [title page](#) of this Program Announcement/Funding Opportunity.

### **E. Notification of Application Review Results**

Each PI and organization will receive email notification of posting of the funding recommendation in eBRAP. Each PI will receive a peer review summary statement on the strengths and weaknesses of the application.

## **IV. ADMINISTRATIVE ACTIONS**

After receipt of pre-applications from eBRAP or applications from Grants.gov, the following administrative actions may occur:

### **A. Rejection**

The following will result in administrative rejection of the application:

- Pre-application was not submitted.
- Project Narrative exceeds page limit.
- Project Narrative is missing.
- Budget is missing.
- Submission of the same research project to different funding opportunities within the same program and fiscal year.
- Human Subject Recruitment and Safety Procedures (Attachment 6) is missing.
- Intervention (Attachment 7) is missing.
- Data Management (Attachment 8) is missing.
- For studies requiring an IND or IDE (Attachment 13), documentation of IND/IDE application submission to the FDA is missing.

### **B. Modification**

- Pages exceeding the specific limits will be removed prior to review for all documents other than the Project Narrative.
- Documents not requested will be removed.
- Following application submission to Grants.gov, the PI will receive an email request from eBRAP to review, modify, and verify the application submitted to Grants.gov.

During this verification period, the PI may upload missing documents (excluding those listed in [Section IV.A., Rejection](#)), replace files, and re-categorize files. These modifications must be completed by the end of the application verification period; otherwise, the application will be reviewed as submitted.

### **C. Withdrawal**

The following may result in administrative withdrawal of the pre-application or application:

- A FY14 NFRP IP member is named as being involved in the research proposed or is found to have assisted in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting documentation. A list of the FY14 NFRP IP members can be found at <http://cdmrp.army.mil/nfrp/panels/panels14>.
- The application fails to conform to this Program Announcement/Funding Opportunity description to the extent that appropriate review cannot be conducted.
- Direct costs as shown on the Research & Related Budget exceed the maximum allowed by this Program Announcement/Funding Opportunity.
- Inclusion of URLs, with the exception of links in References Cited and Publication and/or Patent Abstract sections.
- Page size is larger than 8.5 inches x 11.0 inches (approximately 21.59 cm x 27.94 cm).
- Inclusion of any employee of CDMRP review contractors in applications for funding without adequate plans to mitigate conflicts of interest. Refer to the General Application Instructions, Section II.B., for detailed information.
- Personnel from applicant or collaborating organizations are found to have contacted persons involved in the review process to gain protected evaluation information or to influence the evaluation process.
- The proposed research is not a clinical trial
- The PI does not meet the eligibility criteria.
- For studies requiring an IND or IDE, documentation of IND/IDE approval is not submitted to the CDMRP Help Desk ([help@eBRAP.org](mailto:help@eBRAP.org)) prior to Programmatic Review.

### **D. Withhold**

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending institutional investigation. The institution will be required to provide the findings of the investigation to the USAMRAA Grants Officer for a determination of the final disposition of the application.

## **V. AWARD ADMINISTRATION INFORMATION**

### **A. Award Notice**

Awards will be made no later than September 30, 2015. Refer to the General Application Instructions, Appendix 4, for additional award administration information.

### **B. Administrative Requirements**

Refer to the General Application Instructions, Appendix 4 for general information regarding administrative requirements.

### **C. National Policy Requirements**

Refer to the General Application Instructions, Appendix 5 for general information regarding national policy requirements.

### **D. Reporting**

Refer to the General Application Instructions, Appendix 4, Section J, for general information on reporting requirements.

Quarterly technical progress reports will be required.

### **E. Award Transfers**

The institution transfer of an award supporting a clinical trial is strongly discouraged and in most cases will not be allowed. Approval of a transfer request will be on a case-by-case basis at the discretion of the Grants Officer.

Refer to the General Application Instructions, Appendix 4, Section M, for general information on organization or PI changes.

## **VI. AGENCY CONTACTS**

### **A. CDMRP Help Desk**

Questions related to Program Announcement/Funding Opportunity content or submission requirements as well as questions related to the submission of the pre-application through eBRAP should be directed to the CDMRP Help Desk, which is available Monday through Friday from 8:00 a.m. to 5:00 p.m. ET. Response times may vary depending upon the volume of inquiries.

Phone: 301-682-5507

Email: [help@eBRAP.org](mailto:help@eBRAP.org)

### **B. Grants.gov Contact Center**

Questions related to application submission through Grants.gov portal should be directed to the Grants.gov Contact Center, which is available 24 hours a day, 7 days a week (closed on U.S. federal holidays). Note that the CDMRP Help Desk is unable to provide technical assistance with Grants.gov submission.

Phone: 800-518-4726

Email: [support@grants.gov](mailto:support@grants.gov)

***Sign up on Grants.gov for “send me change notification emails” by following the link on the Synopsis page for the Program Announcement/Funding Opportunity or by responding to the prompt provided by Grants.gov when first downloading the application package. If the application package is updated or changed, the original version of the application package may not be accepted by Grants.gov.***

## VII. APPLICATION SUBMISSION CHECKLIST

Grants.gov Application Components	Action	Completed
SF-424 (R&R) Application for Federal Assistance	Complete form as instructed.	
Attachments Form	Project Narrative: Upload as Attachment 1 with file name "ProjectNarrative.pdf."	
	Supporting Documentation: Upload as Attachment 2 with file name "Support.pdf."	
	Technical Abstract: Upload as Attachment 3 with file name "TechAbs.pdf."	
	Lay Abstract: Upload as Attachment 4 with file name "LayAbs.pdf."	
	Statement of Work: Upload as Attachment 5 with file name "SOW.pdf."	
	Human Subject Recruitment and Safety Procedures: Upload as Attachment 6 with file name "HumSubProc.pdf."	
	Intervention: Upload as Attachment 7 with file name "Intervention.pdf."	
	Data Management: Upload as Attachment 8 with file name "Data_Manage.pdf."	
	Study Personnel and Organization: Upload as Attachment 9 with file name "Personnel.pdf."	
	Surveys, Questionnaires, and Other Data Collection Instructions: Upload as Attachment 10 with file name "Surveys.pdf."	
	Impact Statement: Upload as Attachment 11 with file name "Impact.pdf."	
	Transition Plan: Upload as Attachment 12 with file name "Transition.pdf."	
	IND/IDE Documentation: Upload as Attachment 13 with file name "IND-IDE.pdf."	
Research & Related Senior/Key Person Profile (Expanded)	Attach PI Biographical Sketch (Biosketch_LastName.pdf) to the appropriate field.	
	Attach PI Previous/Current/Pending Support (Support_LastName.pdf) to the appropriate field.	
	Attach Biographical Sketch (Biosketch_LastName.pdf) for each senior/key person to the appropriate field.	
	Attach Previous/Current/Pending (Support_LastName.pdf) for each senior/key person to the appropriate field.	
Research & Related Budget	Complete as instructed. Attach Budget Justification (BudgetJustification.pdf) to the appropriate field.	
Project/Performance Site Location(s) Form	Complete form as instructed.	
R & R Subaward Budget Attachment(s) Form	Complete form as instructed.	