**WAKE FOREST UNIVERSITY**

**COLLABORATIVE PILOT GRANTS APPLICATION**

Date of Application:

Proposed Project Period (Month & Year):       to

Amount Requested (cannot exceed $30,000):

**Project Title**:

**Wake Forest University Reynolda Campus Investigator(s):**

NAME:       PHONE:

DEPARTMENT:       E-MAIL:

NAME:       PHONE:

DEPARTMENT:       E-MAIL:

**Collaborating Investigator(s):**

NAME:       PHONE:

INSTITUTION:

DEPARTMENT:       E-MAIL:

NAME:       PHONE:

INSTITUTION:

DEPARTMENT:       E-MAIL:

**External Support Information:**

If you have applied for external support for this project, please note the source and the status of your application (i.e., pending, funded, or not funded):

If you have other commitments or overlapping obligations during the proposed project period, please indicate how your time will be allocated.

WFU Reynolda Campus Investigators only: Do you have a SPIN account? [ ]  yes [ ]  no
Do you receive email alerts? [ ]  yes [ ]  no

**Compliance Information:**

If this research will involve human participants, animals, biohazards, hazardous chemicals, or radioactive materials, please attach the approval letter from the respective committee.

***Committee approval is required prior to project initiation.***

Human Subjects [ ]  Hazardous Chemicals [ ]

Animals [ ]  Radioactive Materials [ ]

Select agents\*/toxins [ ]  Biohazards [ ]

**\***For the list of select agents see:

[http://www1.wfubmc.edu/EHS/Biological+Safety/Select+Agents/Select+Agent+Listing.htm](http://www1.wfubmc.edu/EHS/Biological%2BSafety/Select%2BAgents/Select%2BAgent%2BListing.htm)

|  |
| --- |
| **Previous Internal Award History (please indicate awards received in the past 3 years)** |
| Publication & Research: Archie Fund: Collaborative Pilot Grant:Pilot Research Grant:Other:  | Year\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_Year\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_Year\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_ | *Please use this space to record additional internal awards as needed.* |

Complete applications include all the items listed below in the following order:

\_\_\_\_\_\_\_ **Completed, signed application page with abstract**

\_\_\_\_\_\_\_ **Project Description**: *(refer to* [*website*](https://research.wfu.edu/office-information/funding/collaborative-pilot-grants-cpg/) *for guidance and requirements for completing the Application Packet)*

 Objectives & Significance – 1 page limit

 Background – 3 page limit

 Methods – 5 page limit

 Project Relevance – 1 page limit

 References – list only most pertinent

\_\_\_\_\_\_\_ **Personnel**

\_\_\_\_\_\_\_ **Research Support**

\_\_\_\_\_\_\_ **External Funding Sources**

\_\_\_\_\_\_\_ **Budget & justification** *(Include how budget will be divided between institutions.)*

\_\_\_\_\_\_\_ **Biosketches/CVs** *(4 page limit per investigator)*

\_\_\_\_\_\_\_ **Description & outcome of previous internal awards**

\_\_\_\_\_\_\_ **Institutional approval for collaborator** *(Download letter from* [*website*](https://research.wfu.edu/office-information/funding/collaborative-pilot-grants-cpg/) *– Section IX)*

\_\_\_\_\_\_\_ **List of WFU Collaborators**

**Incomplete or late applications will not be reviewed**.

Please send the complete application in one PDF file as an email attachment to Rick Orzechowski, orzechr@wfu.edu by 5 p.m. on the deadline date. Hard copies will also be accepted in addition to the electronic application.

**Wake Forest University Reynolda Campus Signatures:**

Applicant: Department Chair:

Applicant: Department Chair:

**Collaborating Investigator and Department Chair Signatures are on Institutional Support letter.**

**ABSTRACT** (*Do not exceed 250 words. A 250-word summary of the proposed activity, suitable for publication. Clearly address intellectual merit and broader impacts in separate statements.)*