**Massey Cancer Center Pilot Program Awards**

**Cover Sheet Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Title:** | | | | | | | | | | | | | |
| **Innovation**  **Pilot** | | | | | | **Statewide Collaboration** | **NCI**  **Catalyst Award** | | | | | | **Team**  **Science** |
|  | CB |  | CPC |  | DT |  |  | R01  Renewal |  | R01  New |  | Multi-Project |  |

|  |  |
| --- | --- |
| **Multiple Principal Investigator (MPI) – Contact** | |
| **Name (Last, First):** | **Degree(s)** |
| **Title:** | **Organization:** |
| **Department/Division:** | **Email:** |
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| **Name (Last, First):** | **Degree(s)** |
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| **Multiple Principal Investigator (MPI) – Contact** | |
| **Name (Last, First):** | **Degree(s)** |
| **Title:** | **Organization:** |
| **Department/Division:** | **Email:** |
| **Other Key Personnel (Name/Academic Title/Department):** | |
| **Biostatistician Name Consulted:** | **Biostatistician Email:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Department Grant Administrator Contact Information** | | | |
| **Name:** | | **Phone:** | **Email:** |
| **Dates of Proposed**  **Period of Support** | | **Direct Costs Requested for Initial Budget Period** | |
| MM/DD/YYYY | MM/DD/YYYY | $ | |

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| **Lay Language Summary** (This summary is provided to the public if awarded and should be written in non-scientific terminology. Up to 200 words – Please use additional page if needed) | | | | | |
| **Please check each Massey Shared Resource being utilized for this project** | | | | | |
|  | Bioinformatics |  | Biostatistics |  | Cancer Informatics Core |
|  | Cancer Mouse Models |  | Flow Cytometry |  | Health Communication & Digital Information |
|  | Microscopy |  | Proteomics |  | Tissue and Data Acquisition and Analysis |
|  | Transgenic/Knockout Mouse |  | Lipidomics / Metabolomics |  | Heath Equity and Disparities Research |

|  |  |
| --- | --- |
| **Indicate compliance approvals that are required for this project:**  Live Animals Human Subjects | |
| **MPI Certification and Acceptance** | |
| I certify that the statements herein are true, complete and accurate to the best of my knowledge, and accept the obligation to comply with the terms and conditions if a grant is awarded as a result of this application. | SIGNATURE OF MULTIPLE PRINCIPAL INVESTIGATOR |
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