

Applicant (Last Name, First Name):



CENTER FOR
GLOBAL HEALTH



Penn Center for Global Oncology Research Grant Pilot Project Program 2025

Deadline: March 31, 2025; 11:00PM EST

Completed applications should be sent to Kierstyn.claycomb@penmedicine.upenn.edu

Applicant Name, Degree, and Faculty Level/Title:

Applicant Department and School:

Applicant Email Address:

Project Title:

Applicant (Last Name, First Name):

Does this project involve any of the following (if yes, you must obtain regulatory approval letters prior to study activation):

Human Subjects? ☐ No ☐ Yes

IRB Protocol #: _____

Date Approved: _____

Animal Subjects? ☐ No ☐ Yes

IACUC Protocol #: _____

Date Approved: _____

Biohazards or Recombinant DNA? ☐ No ☐ Yes

Protocol #: _____

Date Approved: _____

Project Category (choose one):

☐ Basic Science/Laboratory Research (e.g., cell culture, animal models)

☐ Translational Research (e.g., basic to clinical, clinical to community)

☐ Clinical Research (e.g., clinical prevention or therapeutic trials)

☐ Population-based/Cancer Control Research (e.g., epidemiology/genetics, implementation science, behavioral sciences, health services, community-based research)

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AUTHORIZING SIGNATURES

PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR: I certify that the above information is accurate and complete as of this date. I agree to accept responsibility for scientific and technical conduct of this project and for provision of required technical reports if a grant or contract is awarded as a result of this application. If an award is made as a result of this proposal, I will administer it in accordance with the policies of the sponsor and the University.

PI Signature

Date

BUSINESS ADMINISTRATOR (or other individual responsible for proposal preparation and project administration): The budget and administrative information contained in the attached proposal is complete and accurate to the best of my knowledge. If an award is made as a result of this proposal, I will administer it in accordance with the policies of the sponsor and the University. In accordance with the University's Patent Policy, all individuals working on sponsored projects must sign a Participation Agreement. All personnel on this project, including postdocs, students and visiting scientists, will have signed Participation Agreements prior to its initiation. (Call the Penn Center for Innovation, 898-9585, for information on inventions, patents, copyrights, etc.)

BA Signature

Date

BA Typed Name

DEPARTMENT CHAIR: The attached application is approved. It is within the total program and academic objectives of the Department. Adequate space is available or planned for the conduct of the project. The professional time allocations described therein are realistic. If matching funds/cost sharing is required as a condition of an award resulting from this proposal, I will be responsible for assuring that the necessary resources are made available. The information contained in this Application Form is accurate and correct to the best of my knowledge.

Department Chair's Signature

Date

Department Chair's Typed Name

Applicant (Last Name, First Name):

**University of Pennsylvania Center for Global Health
Statement of Compliance**

If I am selected to be a recipient of a Pilot Research Grant from the Penn Center for Global Oncology, I agree to acknowledge this grant with the phrase **“Supported by Center for Global Health and Center for Global Oncology at the University of Pennsylvania”** in all related sources of support, publications and presentations.

In addition, if requested of me, I will send a copy of any publications or abstracts to the administrative offices of the Penn Center for Global Oncology (kierstyn.claycomb@pennmedicine.upenn.edu).

I also agree to be contacted by the Penn Center for Global Oncology, Penn Center for Global Health or their representatives regarding my research and possible speaking opportunities.

Signature

Date

Name – Please print

Applicant (Last Name, First Name):

BIOGRAPHICAL SKETCH OF APPLICANT

A current NIH formatted Biographical Sketch, including Research Grant Support, MUST be included in all applications.

Applicant (Last Name, First Name):

PROJECT SUMMARY/ABSTRACT

**PROJECT
TITLE:** _____

Provide a brief (300-500 words) summary of the research, including Background, Objective/Hypothesis, Specific Aim(s), Study Design, and Cancer Relevance. The final sentence of the abstract should summarize the focus and cancer relevance of the project in non-scientific terms.

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DESCRIPTION OF PROPOSED RESEARCH

**PROJECT
TITLE:** _____

(Sections A-E below must not exceed 5 pages – use continuation pages as necessary.)

A. Specific Aims (suggested 1/2 page or less)

State broad objectives and describe concisely what the research described is anticipated to accomplish. From these outcomes, generate the hypothesis (or hypotheses) to be tested. Limit these to one to three specific aims and use a few sentences to describe.

B. Background and Significance (suggested 1 page or less)

Describe the background of the research proposed. Evaluate existing research and sources related to your project. Identify specific gaps that the project intends to fill. Cite relevant published background material. Support your specific aims. Explain how your expected results will support your hypotheses and why your research is important scientifically, technically, or clinically.

C. Preliminary Studies (suggested 1 page or less)

Summarize the relationship between your prior work and the proposed research. Show that you are qualified by describing research highlights, presenting pilot data, and a demonstrated record of training or expertise in your field. Add references to publications you have related to this work if applicable.

D. Experimental Design and Methods (suggested 2 pages)

Describe the experimental design, methods and procedures planned to accomplish each hypothesis or specific aim of the project. Diagrams or reference articles may be helpful. Include the means by which the data will be collected, analyzed, and interpreted. Describe any new methodology and its advantage over existing methodologies. Discuss the potential difficulties and limitations of the proposed procedures and alternative approaches to achieve the aims. Provide the timeframe for the procedure presented.

E. Impact and Future Plans (suggested 1/2 page or less)

State how these funds will obtain preliminary results that will enable you to compete successfully for national grants in cancer research. Describe how this project will relate to an overall research goal of larger project and provide a timetable for such future applications.

F. Literature Cited (no page limit)

Applicant (Last Name, First Name):

PROPOSED BUDGET

**PROJECT
TITLE:** _____

TOTAL AMOUNT REQUESTED:

TERM: 07/01/2025 to 06/30/2026

BUDGET PROPOSED:

A. Personnel

B. Permanent Equipment (Maximum allowance of less than \$2,000 on any single piece of equipment)

C. Supplies

D. Miscellaneous

E. Travel

BUDGET JUSTIFICATION:

Applicant (Last Name, First Name):