IDBI Innovation Seed Grant Proposal

Cover Sheet

IDBI seed grant application submission date:

Title:

Revision (Y/N):

Principle investigator:

Principle investigator email:

Co-investigators:

New collaborative project among IDBI members? (Y/N):

Total funding requested:

Title of anticipated external grant application(s):

Funder and mechanism of anticipated grant application(s):

Submission date(s) for anticipated external grant application(s):

Introduction (1/2 page limit, revised applications only):

Research Proposal (2 page limit):

<u>Background</u>.

<u>Scientific need</u>.

<u>Proposed research</u>.

Funding potential (2 page limit)

Envisioned grant(s) (list the titles, funders, mechanisms, your role (PI, co-PI, co-I), and envisioned specific aims for each application). *Specify your role on the envisioned external grants. If applicable: Attach NIH or NSF biosketches of major collaborators for the envisioned grants (if different from collaborators already listed on this project). If PI of envisioned grants is not at SLU, specify the percent of effort and/or percentage of funding that will come to SLU.*

Justification for why the IDBI seed grant would make the envisioned grant(s) more competitive. Describe how the seed funding will position your future grant(s) or new collaboration(s) for success. Connect anticipated IDBI Seed Grant generated data to specific supported future aims. Make clear how the IDBI Seed Grant enables future grant applications and research.

Personnel

Principle Investigator (attach NIH- or NSF-style biosketch).

PI's school/department/division.

Co-investigators (internal and external to SLU) (attach NIH- or NSF-style biosketches and Letters of Support).

Other personnel, titles, and roles.

Budget

<u>Dates</u> (9 month limit).

Personnel (List faculty effort, but faculty salary recovery is not allowed)		
Person	**Effort (%)**	**Amount (salary & fringes)**
Total Personnel		

Supplies		
Item	**Number**	**Amount**
Total Supplies		

Equipment		
Item	**Number**	**Amount**
Total Equipment		

Services / Miscellaneous		
Item	**Number**	**Amount**
Total Services / Miscellaneous		

Total	
Overall Total	

Budget Justification

Personnel.

Supplies.

Equipment.

Services / miscellaneous.