

CIEHS IHSFC RESEARCH VOUCHER PROGRAM

APPLICATION COVER PAGES

1. Title of Project:
2. Principal Investigator:
 - 2(a) Academic Rank/Position Title:
 - 2(b). Department of Primary Appointment:
 - 2(c) Telephone number:
 - 2(d) Email address:
3. Collaborator(s):
4. Current CIEHS Membership Status of the PI/Collaborator(s):
5. Dates of Project (indicate beginning and ending dates for the project):
6. Performance Sites (list site(s), building and rooms, where the work will be performed):
7. Budget (indicate the total amount of voucher support requested and estimated total direct cost of the project):
8. If the requested support is for an active NIH-funded project, then please provide the grant number.
9. NIEHS Translational Research Story: Does the project propose translational research? If so, describe how the project serves to bridge rings or nodes on a ring as described in the NIEHS Translational Research Framework using the Translational Research Story Template. (<https://www.niehs.nih.gov/research/programs/translational/using-framework/index.cfm>)
10. Compliance and Training: Note: The P.I. is responsible for complying with University safety rules, policies and procedures. Please state whether or not the application proposes human subjects research and provide an IRB approval letter or letter of determination of exemption from the IRB.

10. Award Type: Small Medium Large

11. Research Interest Group Involvement: Indicate the RIG(s) by checking the appropriate choice(s). (Check all that apply and provide a brief description)

- Cancer
- Multi-Organ Toxicology
- Neurodevelopmental Toxicology
- None

12. Other CIEHS Core Involvement: Indicate cores by checking the appropriate box. (Check all that apply and provide a brief description)

- ITEMFC ('omics)
- BIFC (biostatistics)
- CEC (community engagement)

13. Involvement of University Resources Leveraged by the IHSFC: (Check all that apply and provide a brief description)

- CTU (adult)
- KCPCRU (children)
- Biorepository (name)

SIGNATURES:

Principal Investigator: _____ Date: _____

The Principal Investigator certifies that this is a new project which is not being considered for other intramural funding. The undersigned agrees to accept responsibility for the scientific and ethical conduct of the project.