**Coulter Grant Submission Guidelines**

**Program:** The Wallace H. Coulter Endowment provides the Oversight Committee has approximately $700,000 for direct costs each year to support the translation of projects. The Endowment also provides funding to support non-research translational activities (market assessment, consulting, etc.) is also available to funded projects. Program metrics include successful licensing to industry, creation of new, professionally managed, and financed companies. Emphasis is also placed on improving health and the ability to secure follow-on support. Historically, three to seven grants are funded each cycle. Grant sizes have varied from $40,000 to $330,000.

**Requirements:** Each grant must have at least two PIs, including a primary or secondary BME faculty, and a clinical faculty. Clinical faculty includes professionals with access to patients or patient samples. Larger teams of PIs may also be assembled. You may propose more than one year of milestones prior to anticipated translation, however, projects are funded for only one year at a time (i.e. you will need to re-compete for future year’s funds). New collaborations are valued. Goals should be stated as milestones not hypotheses.

**Required Grant Format**(11 point Font or greater)

* **1 page Cover Page**
	+ Project title,
	+ PIs including departments,
	+ Departmental person(s) responsible for budget approvals
	+ Short paragraph project description, and approximate funds requested.
* **5 page Grant Body**

•    Explanation of clinical unmet need
•    Table of quarterly milestones to be achieved

•    Research plan to achieve milestones (include preliminary data where helpful)

•    Include stage of the project/product

•    Include preliminary data where helpful (not required)

•    Renewal applications should report progress against the original plan

•    Intellectual property status, strategy and plan for translation (license, etc.)

* **Additional Materials**
•    References

•    Approvals (or pending approval) for animals and human subjects (if needed)
•    Biosketches of PIs, and list of current funding and pending funding.
•    Draft budget and Budget justification

**Draft Budget:** Please submit a DRAFT budget using the NIH format using the attached WORD form. Initial submissions are approximate do not need institutional approval. The budget should be directed where needed. Unlike NIH grants, there are no expected minimum efforts for faculty PIs unless directed by your primary organizational unit. Salary for faculty, research staff and students are permitted, but must reflect actual institutional based rates supplied to you by your grants managers or business office. Supplies, consultants and subcontracts and other items are also permitted. Tuition, tuition remission and capital equipment are not allowed. Projects that will build prototype devices (called “assets under construction”) may include purchases of large components. These are allowable expenses and for budget purposes will be listed as equipment (NB. List in the budget justification that these are prototype expenses and not capital equipment). The indirect rate is 0% for all direct costs, including subcontracts. You and or your grants manager will be responsible for working directly with your subcontractor to obtain a final budget to include with your final budget.

**Funded Project Final Budgets:** Projects that are awarded (May 25th) will be required to submit a detailed NIH budget and updated budget justification, via email, to Rachel.Karatz@duke.edu on June 1, 2014. The project period for all budgets is 9/1/14 – 8/31/15. The BME Department staff will enter your final budget into SPS and route to your department for all approvals. Please supply the name and contact info of the grants manager assigned to work with your proposals. This individual will be our primary point of contact for any questions that may arise. Please make sure this staff member is aware of protocol registry numbers for proposals that require human subjects, vertebrate animals, recombinant DNA or carcinogenic/biohazardous materials (routine questions that must be answered for the Duke proposal approval form, dpaf).

|  |  |
| --- | --- |
| Program Director/Principal Investigator (Last, First, Middle): |       |
|  |
| DETAILED BUDGET FOR INITIAL BUDGET PERIODDIRECT COSTS ONLY | FROM | THROUGH |
|       |       |

 List PERSONNEL*(Applicant organization only)*

Use Cal, Acad, or Summer to Enter Months Devoted to Project

 Enter Dollar Amounts Requested *(omit cents)* for Salary Requested and Fringe Benefits

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME | ROLE ONPROJECT | Cal.Mnths | Acad.Mnths | SummerMnths | INST.BASESALARY | SALARYREQUESTED | FRINGEBENEFITS | TOTAL |
|       | PD/PI |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
| SUBTOTALS |       |       |       |
| CONSULTANT COSTS      |       |
| EQUIPMENT *(Itemize)*      |       |
| SUPPLIES *(Itemize by category)*      |       |
| TRAVEL      |       |
| INPATIENT CARE COSTS       |       |
| OUTPATIENT CARE COSTS       |       |
| ALTERATIONS AND RENOVATIONS *(Itemize by category)*      |       |
| OTHER EXPENSES *(Itemize by category)*      |       |
| CONSORTIUM/CONTRACTUAL COSTS | DIRECT COSTS |       |
| SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD *(Item 7a, Face Page)* | $ |       |
| CONSORTIUM/CONTRACTUAL COSTS | FACILITIES AND ADMINISTRATIVE COSTS |       |
| TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD  | $ |       |

PHS 398 (Rev. 6/09) Page     **Form Page 4**