Bridge Funding Application

Instructions
Please include the following when submitting your application:

1. Cover letter from Chair
   - Outline support of request, benefits of bridge funding to the department and the institution
   - Identify department resources committed to support part or all of the project. The department is expected to match funds 1:1. If this is not possible, please contact our office to discuss other sources of matching funds.

2. Application – template on following page, please fill in completely. **If you do not use the template form, your application will be returned without review.**

3. Detailed budget – please include details on how the funding will be used. Use the categories provided or add to the ‘other’ section.

4. For Unfunded Applications, please include:
   - Priority scores
   - Funding cutoffs
   - Scientific review sheets (Summary Statements or pink sheets)
   - Statement on how you will respond to critiques
   - Statement of resubmission date – please state clearly whether new or resubmission

5. CV

Submit a pdf of the application to Anne DeChant at akd6@case.edu or call 216-368-8867.

- Applications will be reviewed for completeness
- Completed applications will be sent to our reviewers. Reviewers’ comments and recommendations will be sent with the complete application to the Vice-Dean for Research
- Dr. Chance will make a recommendation to the Dean, who will make the final decision
- Announcements will be sent to both the Investigator and the Chair via email
- If the award is funded, a Notice of Internal Funding with terms and conditions will be included in the announcement, and must be signed before money will be disbursed
- If you have any questions, contact Anne DeChant at akd6@case.edu or call 216-368-8867

Awards:
- All expenses that support the research enterprise including personnel, supplies, animals, services, etc. are allowable
- **Faculty salaries are NOT allowable expenses**
- The maximum award is not to exceed $60,000 for **one year** (with a possible additional $60,000 coming from department matching funds). Only one award per investigator will be provided within a four year period. The total number of awards will depend on resources available
- If the investigator misses the deadline for grant resubmission as stated in the application, funding may be withdrawn and a written explanation will be required
- If the investigator receives outside funding from any source (non-NIH federal, state, foundation, etc.), bridge funding will be returned back to the pool immediately so future requests can be funded
- Awards are for one year (12 months). Any unspent funds after one year will be returned to the pool

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10900 Euclid Avenue, Cleveland, OH 44106 • Phone: 216-368-0291 • Email: som-resadmin@case.edu
School of Medicine – Office of Research Administration (SOM-ORA)
Under the Vice-Dean for Research
Bridge Funding Program

Applications are accepted on a rolling basis. (last updated: August 2018)

Application for Bridge Funding

Date:
Investigator Name:
Department:
Project Title:
Amount Requested:
Please specify amount requested from BFP and amount provided by department as match.

Current Research:
Please provide a summary of your current research, including a personal statement about your career at CWRU. Approximately ½-1 page.

Statement of how bridge funding will be applied and how it will lead to extramural funding:

History of External and Recent Internal Support:
Provide in the standard NIH ‘Other Support’ format

Statement of remaining funds in the laboratory:

Consequences to the research program because of lack of funding:
Detailed Budget:

Include statement of how bridge funds AND department matching funds will be used. Bridge funds and department matching funds may not be used for faculty salaries. The limit on funding is $60,000 from Bridge Funds and $60,000 from department match. If you request more, please provide sufficient justification.

### DETAIL OF MONTHLY EXPECTED BRIDGE FUNDING EXPENSES

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<thead>
<tr>
<th>Expense Category</th>
<th>Monthly $</th>
<th># of Months</th>
<th>Total $</th>
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<tbody>
<tr>
<td>1). PERSONNEL</td>
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<td>TOTAL Personnel</td>
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<td>2). CORE USE</td>
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<td>TOTAL Services</td>
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<td>3). LAB SUPPLIES</td>
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<td>TOTAL Lab Supplies</td>
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<td>TOTAL BRIDGE FUNDING REQUESTED</td>
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Suggested disbursement plan: six payments, $_________ every two months starting ________.
Current Funding and Application Status

1. Recently funded grant project that you are looking to bridge (please list all if there were multiple funding sources)

   Grant Number:
   Grant Title:
   Start/end dates:
   Total funding (all years):

2. Renewal applications/new applications to continue project

   Grant application title:
   Start/end dates:
   Total funding requested (all years):

   Priority Scores:

   Funding Cutoffs:

   Statement of how Investigator will respond to critiques:

   Statement of Expected Resubmission Date:

   External Scientific Review Sheets (Summary Statements or pink sheets): Please provide as attachment to end of application