HEPATITIS FOUNDATION
INTERNATIONAL

GRANT APPLICATION

IN

VIRAL HEPATITIS EPIDEMIOLOGY,

HEALTH PROMOTION,

AND/OR

OUTCOMES RESEARCH

The goal of this award is to provide funds to support research projects in hepatitis epidemiology, health promotion or outcomes research. This award will support the development of an appropriate research project related to viral hepatitis.

CRITERIA
This award will be made available to individuals in Schools of Public Health or Epidemiology Departments of Medical Schools or State Departments of Public Health.

REVIEW PROCESS
The institution or department should have a well-established research and training program, or experience in epidemiology, as well as, faculty or staff interested in hepatitis research. Candidates and their project must be nominated by an institution on the basis of qualifications, interest, accomplishments, motivation and potential for a research career.

The award provides a stipend of $15,000 for one year.

ADDITIONAL INFORMATION
- Applications are not to exceed 6 pages
- Each awardee will be responsible to the sponsoring institution
- Six copies of any abstract or publications resulting from the study must be submitted to HFI

HEPATITIS FOUNDATION INTERNATIONAL

CAREER DEVELOPMENT AWARD APPLICATION

TITLE OF PROJECT: _____

_____

_____

_____

_____

_____

APPLICANT: Name: _____

Address (home): _____ Home Tel: _____

City: _____ State: _____ Zip Code: _____

Birthplace _____ Nationality: _____

Current Appt.: _____ Degree: _____

Title: _____ Academic Rank: _____

APPLICANT'S INSTITUTION: Name: _____

Address: _____ Bus. Tel: _____

City: _____ State: _____ Zip Code: _____

SPONSOR (S):

Name: _____ Degree: _____

Address: _____ Bus. Tel.: _____

City: _____ State: _____ Zip Code: _____

Name: _____ Degree: _____

Address: _____ Bus. Tel.: _____

City: _____ State: _____ Zip Code: _____

Name: _____ Degree: _____

Address: _____ Bus. Tel.: _____

City: _____ State: _____ Zip Code: _____

PROPOSED STARTING DATE: JULY 16, 2004

APPLICATION DEADLINE: MAY 15, 2004

6 COPIES OF THE COMPLETE APPLICATION IN SETS ARE TO BE SENT TO:

HEPATITIS FOUNDATION INTERNATIONAL
Research Department
504 Blick Drive
Silver Spring, MD 20904

Name_____

SCIENTIFIC SUMMARY OF PROJECT: (Limit: half-page, single spaced)

DESCRIPTION OF PROJECT IN LAY TERMS: (Limit: half-page, single spaced)
-To be used by non-scientific offices of the Foundation

PROVIDE PERCENTAGE ESTIMATION OF AMOUNT OF TIME APPLICANT WILL DEVOTE TO THE FOLLOWING ACTIVITES:

Laboratory research projects _____
Clinical research projects _____
Teaching _____
Other (specify) _____

Clinical responsibility _____

List current research and other financial support? Give Details.
_____
_____
_____

Do you currently have pending any other application for a Career Development Award (or its Equivalent)? _____
If yes, state the title of the Award and the Agency. Attach an abstract for each application.
_____
_____
_____

Please state projected institutional salary for your position at the time this award would be effective. Would the salary requested in this application be supplemented by the sponsoring institutions or any other source? ____ If yes, give details. State the percentage of the fringe benefits paid by your institution.
_____
_____
_____

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DESCRIPTION OF PROPOSED RESEARCH PROJECT

The description of the proposed project must include the following items in sufficient detail to permit evaluation of the scientific merit of the study. This should not exceed 6 pages, single-spaced.

1. Statement of purpose and scientific aims.
2. Background studies of proposed project (including preliminary data)
3. Experimental design.
4, Detailed description of methods and materials to be used.
5. Significance of the proposed research to viral hepatitis.
6. Evidence of approval of this project by the appropriate review committees of the applicant institution if human and/or animal subjects are used.

Name:_____

Supporting letter from your sponsor(s), to include

- Sponsor's biographical sketch
- Relevant bibliography
- Description of the facilities and equipment available for the proposed project

CURRICULUM VITAE FOR APPLICANT

Attach a copy of your curriculum vitae which should include the following information:

Education (beginning with entry into college)
Experience (all positions held post-doctoral)
Specialty or subspecialty board certification(s) held
All your publications
Academic and professional honors (including all scholarships, traineeships, fellowships, with dates and sources)
Memberships in professional societies within the past 10 years
NOTE: Include a statement about your career plans for the immediate and distant future

RESEARCH EXPERIENCE: Start with first project in which you were involved following baccalaureate and list consecutively to date. Attach additional sheets if needed.

1. Title of Project: _____
_____

Date of Work: _____
_____

Name & Location of Institution
_____
_____

Title of Project:_____

Description of Project _____
_____

Percent of Effort Expended_____

Date of Work: _____

Name & Location of Institution _____
_____

Description of Project _____

Percent of Effort Expended_____

Sponsor(s) _____

Name:_____

REQUIRED SIGNATURES

THIS STATEMENT IS TO BE SIGNED BY THE APPLICANT

I am familiar with the regulations, policies and objectives of the Hepatitis Foundation International concerning this form of research support. In the event that a Career Development Award is made, I agree to fully comply with these regulations during the entire period of support.

Signature: _____Date: _____

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THIS STATEMENT IS TO BE SIGNED BY THE SPONSOR(S) WITH WHOM THE APPLICANT WILL WORK.

I am familiar with this application for a Career Development Award of the Hepatitis Foundation International and with the regulation, policies and objectives of the Foundation concerning this form of research support. In the event that this award is made, I shall agree to be his/her sponsor with the understanding that, to the best of my knowledge, I will be at the below-named department and institution and available to provide advice and guidance to the awardee during the entire one-year term of the Career Development Award.

1. Signature _____ Date: _____

   Name (Please type): _____

   Department: _____

   Institution: _____

2. Signature _____ Date: _____

   Name (Please type): _____

   Department: _____

   Institution: _____

Name: _____

THIS STATEMENT TO BE SIGNED BY THE DEPARTMENT DIRECTOR

I am familiar with this application for a Career Development Award of the Hepatitis Foundation International and with the regulations, policies and objectives of the Foundations concerning this form of research support. In the event that this award is made, our facilities are available and adequate to support the proposed research. I shall accept the above applicant in this department during the one-year term of his/her support.

Signature: _____Date:_____

Name (please type):_____

Department: _____

Institution: _____

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THIS STATEMENT TO BE SIGNED BY A FINANCIAL OFFICER OF THE APPLICANT INSTITUTION

I am familiar with this application for a Career Development Award of the Hepatitis Foundation International and attest that the financial information as given by the applicant is correct, to the best of my knowledge.

Signature: _____ Date:_____

Name (please type):_____

Department: _____

Institution: _____