Month

2024 AGA Digestive Cancer Research Awards

| Applicant Eligibility → Appli | icant Information Project Information Over | view → Mentor Information → Required Uploads → | | | |
|------------------------------------------|----------------------------------------------|----------------------------------------------------------|--|--|--|
| Contact Permissions | | | | | |
| Principal Investigato | r Information | | | | |
| First Name | Middle Name/Initial | Last Name | | | |
| | | | | | |
| Degree(s) | | | | | |
| Select all that apply. | | | | | |
| □MD | ☐ PhD | □MBBS | | | |
| □DO | □ DVM | □MBChB | | | |
| □ EdD | ☐ ScD | □МА | | | |
| MAS | □MBA | □MHS | | | |
| □МРН | □MS | □MSHS | | | |
| Other (please specify | <i>(</i>) | | | | |
| ORCiD ID | | | | | |
| Provide your <u>ORCiD ID</u> a | s a full URL. For example, the ID 1234- | 5678-9123-4567 is entered as: | | | |
| https://orcid.org/123/ | 4-5678-9123-4567 | | | | |
| To find your number or cr | reate an ORCiD ID, visit the <u>ORCiD we</u> | bsite. | | | |
| | | | | | |
| Email Address | | | | | |
| List an email address you | check regularly and that will remain a | ctive over the duration of the award. AGA may contact yo | | | |
| regarding the status of yo | our application or to request additional | information. | | | |
| | | | | | |
| | | | | | |
| Completion Date of | Terminal Training or Degree | | | | |
| | | aining or received your terminal degree. If you have | | | |
| completed multiple fellov | wships of advanced degrees, report the | e date for the training/degree completed most recently. | | | |

| Select | | |
|--------------------------------|---------------------------------------|------------------------------------------------------------|
| Year | | |
| Select | | • |
| | | |
| Current Position | | |
| Select | | v |
| Will you have a new positi | ion/title before the start dat | te of this award? |
| ○No | | |
| ○Yes | | |
| Appointment Date | | |
| | r will be, appointed to a full-time f | faculty position. Applicants must have a full-time faculty |
| | ne start date of this award in April | |
| | | |
| Current Institution | | |
| | | |
| Institution Address Line 1 | | |
| | | |
| Institution Address Line 2 | | |
| | | |
| Institution Address Line 3 | | |
| | | |
| City | State/Province | ZIP/Postal Code |
| | Select ~ | |
| Country | | |
| Select | ~ | |
| | | n different from your current institution by the |
| start date of this award in | April 2024? | |
| ○ No | | |
| ○Yes | | |
| | | |
| | | |
| Gender | | |
| ○ Female | | |
| ○ Male | | |
| ○Nonbinary | | |
| OPrefer not to disclose | | |
| Ethnicity | | |
| ○ Latinx or Hispanic origin | | |
| ○ Not Latinx or of Hispanic o | rigin | |
| ○ I do not wish to identify my | | |
| Race | | |
| | | |

| □As | ian |
|---------|----------------------------------------------------------------------------------------------------------------------------------|
| _ Bla | ack or African American |
| _ Mi | ddle Eastern or North African |
| □Na | tive Hawaiian or Pacific Islander |
| _w | hite |
| _ Ot | her (please specify) |
| _] I d∘ | o not wish to identify my race |
| | |
| | |
| Prin | cipal Investigator Disclosure Statement |
| Appli | cants must disclose any arrangements or relationships relevant to the submitted proposal. These may include |
| arran | gements or relationships with: |
| · A | company whose product is featured prominently in the submitted proposal. |
| Α | company making a competing product to one that is featured prominently in the submitted proposal. |
| | ny organization or entity connected to this funding opportunity (e.g., as noted in the award title or funding knowledgments). |
| Sele | ect |
| Prin | cipal Investigator Disclosure Certification |
| l, the | undersigned, certify that I have disclosed all relevant arrangements and relationships that are relevant to this |
| propo | osal. I understand that failure to disclose relevant arrangements and relationships may result in the immediate |
| termi | nation of my eligibility and/or forfeiture of AGA award funds. By typing my name in the field below, I acknowledge |
| that I | agree with the above statements. |
| | |
| | |

☐ Native American or Alaskan

2024 AGA Digestive Cancer Research Awards

| Applicant Eligibility Applicant Information Project Information Overview Amentor Information Required Uploads Contact Permissions | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| AGA-Caroline Craig Augustyn & Damian Augustyn Award in Digestive Cancer | | | | |
| Submission Status | | | | |
| Have you previously submitted this project for an AGA research award? | | | | |
| ○ No. | | | | |
| ○ Yes. | | | | |
| Project Title | | | | |
| Type of Research | | | | |
| Select the category that best describes your proposed research. | | | | |
| • <u>Clinical Research</u> : Research involving direct contact with human subjects or using clinical data to address problems related to the prevention, diagnosis, treatment, or outcome of human diseases (e.g., clinical epidemiology). This category also includes research related to health care delivery (e.g., health services, health IT). | | | | |
| Resign/Translational Research: Research with a primary goal of understanding basic biology or disease mechanisms. | | | | |

<u>Franslational Research</u>: Research with a primary goal of understanding basic biology or disease mechanisms. This category can involve animal subjects, cell culture, human biospecimens or human data as resources for

laboratory- or informatics-based investigation.

O Clinical Research

○ Basic/Translational Research

Area of Study

Select the area of study that is most relevant to your proposal.

| Select | ~ |
|--------|------|
| | |

Abstract

Provide a summary of the proposed project in 250 words or less.

Word count: 0 / 250

| Study Populatio | n | | | |
|-------------------|---------------------------------------------------------------------------|-------------------------|------------------------|-------------------|
| | y your study population in 200 words | s or less. As appropria | te based on the type o | of investigation, |
| include: | | | | |
| . Diamataninahadi | | | | |
| | ing sex as a biological variable. ic and/or genetic diversity of human | subjects or data or sa | amples derived from h | uman subjects |
| | r selecting a specific model system a | | | |
| \\/ | 200 | | | |
| Word count: 0 / | 200 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Digestive Health Relevance Statement

Describe the relevance of this research to human digestive health in 100 words or less. Investigators should describe how, in the short or long term, the proposed research would contribute fundamental knowledge and/or application of that knowledge to enhance digestive health or to reduce illness and disability among patients with digestive disorders.

Word count: 0 / 100

Clinical Guideline(s) Relevance

Does your project address any evidence gaps highlighted in an an <u>AGA clinical guideline</u>, such as the <u>GI Cancer Surveillance in Gastric Intestinal Metaplasia guideline</u>? If yes, please provide a reference to the specific guideline(s) and **briefly** summarize those aspects of the investigation.

Note that project relevance to clinical guideline evidence gaps is not used in the evaluation of applications.

Word count: 0 / 200

| Keywords |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Provide one to five keywords that best describe the proposed research. Separate keywords with commas. |
| Word count: 0 / 10 |
| |
| Current Percent Effort |
| What is your <u>current</u> total percent effort dedicated to research? |
| |
| Percent Effort on the Proposed Project |
| What percent effort will you dedicate to this project if you receive funding from AGA? |
| |
| Institutional Review |
| Indicate if your project requires IRB/IACUC approval. |
| Note that if the proposed project is funded, a copy of the institutional approval must be provided to AGA prior to funds |
| disbursement. If approval is not necessary, then the recipient must provide documentation from the appropriate regulatory committee. |
| |
| □IACUC |
| □IRB |
| □ Not Applicable |
| Other Personnel Involved in the Research |
| List individuals other than the principal investigator (i.e., applicant) who are involved in the project (e.g., collaborators and other key personnel), their degrees/credentials, institution, and a brief description of their specific role within the project (1-2 sentences). |
| Note: You must upload a biosketch for all key collaborators and personnel in the <i>Required Uploads</i> section of this application. |
| Personnel Action |
| No Personnel have been added. Click on Add Individual below. |
| |

Add Individual

Home > My Applications > 2024Cancer-15316 - New Application

2024 AGA Digestive Cancer Research Awards

| <u>Applicant Eligibility</u> → | $\underline{ApplicantInformation} \ \rightarrow $ | Project Information Overview | \rightarrow | Mentor Information | \rightarrow | Required Uploads | \rightarrow |
|--------------------------------|-----------------------------------------------------|------------------------------|---------------|--------------------|---------------|------------------|---------------|
| Contact Permissions | | | | | | | |

AGA-Caroline Craig Augustyn & Damian Augustyn Award in Digestive Cancer

*Mentor information is not required for Funderburg applications

Early-career investigators are required to have a mentor who supervises the applicant's research activities.

A NIH biographical sketch is required for the mentor. In the personal statement section of their biosketch, mentors should describe their relationship with the applicant and their role in the proposed research project.

Note: Award funds are intended to support the applicant. Therefore, requests for salary, fringe benefits, or other support for the mentor are <u>not allowed</u>.

| Mentor's First Name | Mentor's Middle Name | | | |
|-------------------------------------------------------|--------------------------------------|--|--|--|
| | | | | |
| Mentor's Last Name | Mentor's Degree(s) | | | |
| | | | | |
| Mentor's Position/Title | | | | |
| | | | | |
| Does the mentor work at the | e same institution as the applicant? | | | |
| Nee applicant and mantaguards at the same institution | | | | |

O No, mentor is at a different institution.

2024 AGA Digestive Cancer Research Awards

Applicant Eligibility Applicant Information Project Information Overview Mentor Information Required Uploads

Contact Permissions

AGA-Caroline Craig Augustyn & Damian Augustyn Award in Digestive Cancer

Instructions for Applicants

All documents outlined below must be uploaded as PDF files. Individual files must not exceed 25 MB. Clearly mark each document with a section header at the top of the first page (e.g., LastName_ResearchPlan).

Follow the page limits and formatting guidelines provided in the Application Questions section of <u>AGA's Frequently</u> <u>Asked Questions page</u>.

Applications missing any of the required documents will automatically become ineligible for review.

1. Specific Aims

The specific aims are limited to <u>one</u> page. Follow the formatting guidelines provided in the Application Questions section of <u>AGA's Frequently Asked Questions</u> page.

Choose File No file chosen

2. Research Plan

The research plan is limited to <u>three</u> pages and should include three distinct subsections:

- Significance.
- Innovation.
- Approach (you may include preliminary data in this section).

The research plan should include sufficient information to evaluate your proposed project independent of any other documents submitted with your application.

Choose File No file chosen

3. References

There is no page limit for your list of references. Use the formatting style of the AGA journal Gastroenterology.

Choose File No file chosen

4. Budget

Use the <u>AGA budget template</u>. Complete a budget for the full term of the award and adhere to the guidelines noted below on allowable and unallowable costs.

This award is intended to support direct research-related activities and may be used to support a new endeavor or an ongoing basic or clinical research project.

The following expenses are allowable:

- Salary and benefits of research assistants, laboratory technicians or other non-faculty personnel.
- Biostatistics support.
- Supplies, animals, equipment and/or other materials necessary for the proposed research. Note that equipment costs
 may not exceed \$10,000 unless the cost is a shared department expense and is documented by a letter attached with
 the budget justification.

The following expenses are \underline{not} allowed:

- Salary and benefits of the principal investigator (i.e., applicant).
- Salary and benefits of the mentor.
- Indirect costs.
- Travel costs.

For questions related to allowable and unallowable costs, please email awards@gastro.org.

Choose File No file chosen

5. Budget Justification Narrative

There is no page limit for the budget justification. Follow the formatting guidelines provided in the Application Questions section of <u>AGA's Frequently Asked Questions page</u>.

Choose File No file chosen

6. Research Facilities and Resources

Using the <u>AGA Facilities and Resources template</u>, describe existing institutional facilities and resources you will leverage to support the proposed project.

Choose File No file chosen

7. PI Biographical Sketch

Use the NIH Biographical Sketch template. The biosketch is limited to five pages.

Within the personal statement section of the biosketch, applicants must address how the AGA-Caroline Craig Augustyn & Damian Augustyn Award in Digestive Cancer will aid in their transition to independence and clarify how the proposed project will build upon, and is distinct from their existing career development award.

Choose File No file chosen

8. Other Support

List all active and pending research support. Follow guidance for NIH PHS 298 Other Support and use their sample document for formatting. Upload as a PDF file. There is no page limit.

Choose File No file chosen

9. Other Biographical Sketches

This section is for biosketches of the preceptor (i.e., scientific mentor) and all key collaborators and personnel.

Use the NIH Biographical Sketch format. Each biosketch is limited to five pages. Combine all biosketches into a single PDF for upload.

In the Personal Statement section, the mentor must describe their relationship with the applicant and their role in the proposed project.

Choose File No file chosen

10. Letters of Support

Each letter of support is limited to <u>one</u> page. Combine all letters of support into a single PDF for upload. Applicants must submit the following letters of support:

- 1. A letter of institutional commitment from the applicant's division chief or department chair. This letter must verify that the award is being used to provide the applicant with protected time for research; that the institution will provide adequate laboratory space and/or other supporting facilities; and that the institution and the applicant will adhere to the terms of the award, including timely and accurate reporting of the awardee's research activities following AGA's progress and financial reporting requirements.
- 2. A letter from the scientific mentor outlining their involvement with the research and specific plans for the applicant's research career development.

Applicants may also submit additional letters of support verifying commitments aside from those listed above, such as from key collaborators.

Choose File No file chosen

*Career Development Award information is not required for Funderburg applications

Supporting Information for Applicant's Career Development Award

Applicants for the AGA-Caroline Craig Augustyn & Damian Augustyn Award in Digestive Cancer must have an existing career development award focusing on the pathogenesis, prevention, diagnosis or treatment of digestive cancer.

11. Specific Aims of Career Development Award

Upload the Specific Aims page from your existing career development award.

Choose File No file chosen

12. Confirmation of Career Development Award

Provide proof of your existing career development award, such as a Notice of Award for career development awards from the NIH.

Choose File No file chosen

Eligibility Exemption

If you received an eligibility exemption letter from AGA, upload that exemption letter here.

Choose File No file chosen