NIH F30/F31/F32 NRSA FELLOWSHIP
PROPOSAL SUBMISSION REVIEW CHECKLIST

Office of Contracts and Grants
UNIVERSITY OF COLORADO **BOULDER**

PI Name_____ Due Date _____

Proposal Analyst to Check

Check package for errors
All files in PDF
Correct package used *(PA-19-192/PA-19-191 for F30, PA-19-195 for F31 Predoc, PA-19-196 for F31 Predoc-Diversity, and PA-19-188 for F32 Postdoc)*

R&R Cover Page
- ☐ DUNS: 007431505
- ☐ Check institution name and address
- ☐ Contact Person = Proposal Analyst
- ☐ EIN: 1846000555A2
- ☐ H: Public/State Controlled Institution Type of Application New_____Resubmission ___
  - ☐ Federal Identifier provided, if Resubmission
- ☐ Title Length – 200 characters max
- ☐ Earliest start date: 7/1/2020
- ☐ Congressional District: CO-002
- ☐ PI Contact Info = Fellow
- ☐ Estimated Funding (total cost)
- ☐ AOR Contact Info = PA Info

Other Project Information
- ☐ Human Subjects: 00003492
- ☐ Animal Subjects: D16-00388
- ☐ Proprietary Info
- ☐ International Collaboration

Project Performance Sites
- ☐ CUB information

Senior/Key Person Profile
- ☐ Fellow = PI
- ☐ Key Person Name and Email
- ☐ Fellow has Commons credential
- ☐ Person 1 = Sponsor with Project Role of Other, Sponsor or Co-Sponsor

Fellowship Supplemental Form
- ☐ Budget details for tuition and fees only provided
- ☐ 100% of actual tuition and fees listed

Notes: Funding may be requested for stipend, tuition and fees, and institutional allowance only. Tuition, fees, and stipend amounts are prescribed per NOT-OD-18-175. IDC is not allowed. This total is provided in the Estimated Project Funding box.

Letters of Reference are due by the submission deadline and are submitted through eRA Commons. Details on this process are online at https://grants.nih.gov/grants/how-to-apply-application-guide/submission-process/reference-letters.htm

Grad Student/Postdoc to Check

- ☐ 11 pt font, ½" margins
- ☐ Assignment Request Form (optional)

R&R Cover Page
- ☐ Cover Letter (required)

Other Project Information
- ☐ Project Summary/Abstract (30 lines of text)
- ☐ Project Narrative (2-3 sentences)
- ☐ Bibliography & References Cited (no limit)
- ☐ Facilities & Other Resources (no limit)
- ☐ Equipment (no limit)

Other Attachments
- ☐ Certification Letter (F31 Diversity only)

Senior/Key Person Profile
- ☐ Biosketch (5 page limit) – matching credentials

Fellowship Supplemental Form
- ☐ Introduction (Resubmission only, 1 page)
- ☐ Background and Goals for Fellowship Training (6 pages)
- ☐ Specific Aims (1 page)
- ☐ Research Strategy (6 pages)
- ☐ Respective Contributions (1 page)
- ☐ Selection of Sponsor and Inst. (1 page)
- ☐ Progress Report Publication List (N/A)
- ☐ Responsible Conduct of Research (1 page)
- ☐ Sponsor/Co-Sponsor Statements (6 pages)
- ☐ Letters of Support from Collaborators, Contributors, and Consultants (6 pages)
- ☐ Description of Inst. Environment, Commitment to Training (2 pages) – (with Additional Educational Information included only for F30/F31)
- ☐ Vertebrate Animals – *if applicable*
- ☐ Select Agent Research – *if applicable*
- ☐ Resource Sharing Plan – *if applicable*

Additional Information
- ☐ Human Stem Cells: Yes or No
- ☐ Fellowship Applicant information complete
- ☐ Appl. for Concurrent Support – *if applicable* (1 page)
- ☐ Citizenship status selected

Other Project Information
- ☐ Inclusion Enrollment Report – *if applicable*

Human Subjects and Clinical Trials – *complete if applicable and includes*:

Fellowship applicants who are proposing to gain clinical trial research experience under a sponsor's supervision (i.e., you will not be leading an independent clinical trial): Even if you answered "Yes" to all the questions in the Clinical Trial Questionnaire, only certain fields of the PHS Human Subjects and Clinical Trials Information form are required (and other fields are not allowed) because the study is not an independent clinical trial. Do not provide information in "Section 4 – Protocol Synopsis" or in "Section 5 – Other Clinical Trial-related Attachments" of the study record.

Do not provide an NCT# in Section 1, item 1.5. This should only be provided in the Sponsor(s), Collaborator(s), and Consultant(s) documents if applicable.

	Type of Research			
HS/CT Forms and Documents	**Human Subjects, Exemption 4**	**Human Subjects, no Clinical Trial**	**Clinical Trial**	**File Name** *(if multiple study records, add _StudyRecord# to each file)*
Study Record Form	Required	Required	Required	*PILastName_StudyRecord*
Study Record Form: Section 1	Required	Required	Required	
Study Record Form: Section 2	Not required	Required	Required	
Study Record Form: Section 3	Required - only justification of exemption document	Required	Required	
Study Record Form: Section 4-5	Do not complete	Do not complete	Do not complete	
Inclusion of Women, Minorities, & Children	Required	Required	Required	*PILastName_Inclusion*
Recruitment and Retention Plan	Not required	Required if study involves human participants	Required	*PILastName_RRPlan*
Study Timeline	Not required	Required if study involves human participants	Required	*PILastName_Timeline*
Inclusion Enrollment Report	Not required	Required	Required	
Protection of Human Subjects	Not required	Required for all non-exempt research. For exempt, provide justification for exemption.	Required	*PILastName_Protection*
Single IRB	Required only for Multi-site study	Required only for Multi-site study	Required only for Multi-site study	*PILastName_IRBPlan*
Data and Safety Monitoring Plan	Optional	Optional	Required	*PILastName_DataSafety*
Overall Structure of the Study Team	Optional	Optional	Required	*PILastName_StudyTeam*