## NGSP Pre-Proposal Form

**Applicant Information**

1. First and Last Name
   * Prepopulated from registration
2. Email
   * Prepopulated from registration
3. Name of your primary institution {Who is your employer?}
   * [free text]
4. Name of your department at your primary institution
   * [free text]
5. What is your faculty appointment at the primary institution? {Example: Professor, Associate Professor, Assistant Professor, etc.}
   * [free text]
6. Your highest degree obtained
   * [MD or equivalent, PhD or equivalent, MD/PhD or equivalent, Masters or equivalent]

**Please consult with a representative of the Technology licensing office or equivalent business office supporting innovation/industry engagement (TLO) to complete this information to the best of your knowledge.**

1. Please list all your affiliations other than your primary institution {Examples: Hospitals, HHMI, Universities, etc.}.
   * Yes, please list the name(s) [free text]
   * No
2. Do you have any invention disclosures, patent applications (published or unpublished), or issued patents relevant to this research proposal?
   * Yes
   * No
3. If you answered "Yes" to previous question, are there any other assignees or owners, other than you and/or your primary institution, to those invention disclosures, patent applications (published or unpublished), or issued patents ?
   * Yes
   * No
4. Do you have any funding sources or have you submitted any funding applications (government, foundation, etc.) relevant to this research proposal?
   * Yes
   * No

**Instruction Acknowledgment**

*Hyperlink to “Instructions document” (in this section we have a link to the PDF document and applicant will have to review and acknowledge reading it)*

Please click the link above to view the instructions

[x] I *acknowledge having read the instructions and understand that the submission of this information is non-confidential. I have consulted with a representative of my TLO in order to complete this questionnaire and the provided information is complete and accurate to the best of my knowledge.*

## 

**Pre-Proposal Questions**

***IMPORTANT note to the PI: Your pre-proposal should only include NON-CONFIDENTIAL information***

Title of Proposal

**(20 words max)**

Unmet Medical Need

*What unmet medical need will be addressed by your research proposal? Explain the importance of your proposal to improving human health.*

**(75 words max)**

Novelty of Science

*How does your research proposal challenge or shift current biomedical research concepts or understanding?*

**(150 words max)**

Translatability of Science

*How will the outcomes from your research proposal be used to improve human health?*

**(150 words max)**

Research Plan Description

*What are the objectives and specific aims of the proposed research?  Describe the strategy, design, methods and analyses that will be used to achieve these objectives and specific aims. Please* ***do not*** *provide any graphics, tables, images, structures, etc. No budget is required for pre-proposal*

**(750 words max)**

Expected Outcomes of Research Plan

*What are the anticipated advancements to biomedical knowledge to improve human health?*

**(250 words max)**

Feasibility of Research Plan

*Do you have, or can you easily access all research resources, equipment, and facilities needed to complete your research proposal? Please explain.*

**(50 words max)**

Additional Information (Optional)

*Please provide any additional* ***relevant*** *&* ***non-confidential information*** *that you would like us to consider as part of your proposal. Please do not mention your name or affiliations.*

**(50 words max)**