GRANT APPLICATION

(GRANT APPLICATION—(Completed applications should be emailed to drosberger@gmail.com)

| Principal Investigator: Department: Address: City, State, Zip Code: Phone: Fax: | email: | | | |
|--|---------------------------------------|--|--|--|
| Organization/Institution Name: Organization/Institution Address: City, State, Zip Code: | | | | |
| Phone: Email: | Fax: | | | |
| Primary contact person for grant ad | ministration: | | | |
| Phone: Email: | Fax: | | | |
| Applicant's organization must be a non-profit acaden | nic, research or medical institution. | | | |
| Federal Tax ID number: | | | | |
| Project Title: | | | | |
| Proposal request total (maximum grant \$30,000): | | | | |
| Project Area (e.g. diabetic retinopathy, AMD, glaucoma, strabismus, etc.): | | | | |
| | | | | |
| Signature, Applicant | Date | | | |
| Print Name and Title | | | | |
| Signature, Financial Officer | Date | | | |
| Print Name and Title | | | | |

Lay summary of proposal (1500 words maximum). This summary should summarize the essential elements of the proposal in lay terms.

Lay summary continued (page 2 of 3 maximum)

Lay summary continued (page 3 of 3 maximum)

Budget:

Please prepare itemized budget for project using standard accounting expenditures categories. Grants are for one year. Since the purpose of FORE-I grants is to provide proof of concept and pilot study funding for innovative and potentially game-changing research, funding will be made for the purchase of Equipment and Supplies. It is assumed that all, or the vast majority, of salary support for the Principal Investigator will come from other sources.

| DETAILED BUDGET FOR BUDGET PERIOD DIRECT COSTS ONLY | FROM | THROUGH | |
|--|---------------------|---------|----|
| CONSULTANT COSTS | | | |
| EQUIPMENT (Itemize) | | | |
| SUPPLIES (Itemize by category) | | | |
| OTHER EXPENSES (Itemize by category) | | | |
| SUBTOTAL DIRECT COSTS FOR BUDGET PERIOD (not to exc | eed 1 year): | | \$ |
| Indirect Costs (preference will be given to applications without Indirect Costs, but in any event Indirect Costs m | nay not exceed 10%) | | |
| TOTAL COSTS (not to exceed \$30,000) | > | \$ | |

Budget justification:

Other support or applications anticipated this year for this or similar research, including salary support for the Principal Investigator:

Other known related or similar research:

Scientific Proposal (2 pages):

(No longer than two pages that covers the points in a clear and concise manner)

Scientific Proposal (page 2 of 2 maximum):

Three Major Scientific Accomplishments (1 page limit):

(On this page, list up to three major research accomplishments of the Principal Investigator. Please document these accomplishments based on peer-reviewed publications or patent applications, if applicable. Please attach these non-confidential materials to the grant. Describe the impact of these accomplishments on the advancement of scientific discovery)

Accomplishment #1:

Accomplishment #2:

Accomplishment #3:

Please provide a Biographical Sketch (with publications) for the Principal Investigator: (No more than one page)

Any additional information: