

PROJECT PROPOSAL FORM

http://epi.grants.cancer.gov/Consortia/proposal.html

INSTRUCTIONS

After completing this form, save it to your computer and e-mail the form and your CV (this is required) to NCICohortConsortium@mail.nih.gov.

Date				
Project title				
Point(s) of contact				
First name, Middle initial, Last name				
Title				
E-mail				
Cohort affiliation				
Organizational / Institutional Affiliation (include institution's DUNS number and FWA)				
Do you have an eRA Commons account?	□ YES □ NO			
Plan for funding (include whether there would be funding for each cohort to support data preparation)				

Background and significance (limit to 500 words)		

Overall goal
Specific aims
Design and analysis plan (limit to 250 words)

Why a cohort consortium approach is necessary			
Minimum number of cases per cohort needed to answer primary aim (limit to 250 words)			
Required outcome data			
Required outcome data			
Required exposure data			

Required covariate data				
Are biospecimens required?	☐ YES	□ NO		
If yes, specify type and volume needed	Туре	Volume		
	□ DNA□ Blood			
	□ Serum			
	☐ Plasma			
	Indicate if a special processing (e.g. fasting sample) is required:			
FOR STEERING COMMI	TTEE ONLY			
Cohort Consortium Steering Committee Decision				
Comments				