



AMERICAN CANCER SOCIETY

ALL GRANT POLICIES

EFFECTIVE JANUARY 2020

ELECTRONIC APPLICATION DEADLINE: APRIL 1, 2020

PAPER APPLICATION COPY DEADLINE: APRIL 2, 2020

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MISSION

The American Cancer Society's mission is to save lives, celebrate lives, and lead the fight for a world without cancer.

AMERICAN CANCER SOCIETY

ALL GRANT POLICIES

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1. DESCRIPTION OF THE EXTRAMURAL RESEARCH AND TRAINING GRANTS PROGRAM OF THE AMERICAN CANCER SOCIETY

The American Cancer Society's Extramural Research Program primarily supports beginning investigators, across a wide range of disciplines, in innovative cancer-control research and training to meet critically important needs in the control of cancer.

Each year the Society receives approximately 1,500 grant requests. All undergo rigorous, independent peer review to identify the most meritorious projects for funding. **We strongly encourage all ACS grantees to freely and rapidly share their data with systems open to the public to maximize value to cancer patients.**

The Society offers extramural support for research and training via the programs described below and includes a priority focus on cancer health equity.

GRANT MECHANISMS

RESEARCH GRANTS FOR INDEPENDENT INVESTIGATORS

Research Scholar Grants provide resources for investigator-initiated research projects in a variety of cancer-relevant areas.

- **Eligibility**

Applicants must be independent, self-directed researchers within six years of their first academic appointment. Clinician scientists who remain active in patient care must be within eight years of their first academic appointment. Applicants typically must be within 12 years of receiving a terminal (doctorate) degree and cannot have more than one R01/R01-like grant (>\$100,000 per year direct costs for more than three years) as principal investigator at the time of application.

Eligible RSG applicants to the Cancer Control and Prevention Research Program that focus their research on either: 1) health policy/health services research or 2) achieving cancer health equity may be at any career stage.

- **Funding**

The maximum award covers four years with up to \$165,000 per year (direct costs), plus 20% allowable indirect costs.

Priority Area on Health Equity: For RSG awards in the Cancer Control and Prevention Research Program with a focus on health equity, the maximum award is for four years at up to \$165,000 per year (direct costs), plus 20% allowable indirect costs. Additionally, large multilevel studies that address cancer health equity may propose up to a maximum of five years and \$200,000 per year (direct costs), plus 20% allowable indirect costs.

Research Scholar Grant in the Role of Health Policy and Healthcare Insurance in Improving Access to and Performance of Cancer Prevention, Early Detection, and Treatment Services supports investigations evaluating the impact of changes occurring in the health care system with a focus on cancer prevention, control, and treatment.

Improving access to care may also reduce inequities and health disparities. New health public policy initiatives—for example, the new federal and state marketplaces that have expanded insurance coverage, as well as Medicaid expansion in some states—create natural experiments ripe for evaluation. Research funded by this RFA focuses on the changes in national, state, and/or local policy and the response to these changes by health care systems, insurers, payers, communities, practices, and patients.

Applications will be accepted via the Research Scholar Grant in Cancer Control and Prevention Program.

- **Eligibility**

Investigators evaluating changes in the health care system with a focus on cancer.

- **Funding**

Award length and budget limits vary; please see the Research Scholar Grant policies and instructions for a detailed description of this RFA.

Institutional Research Grants (IRG) are awarded to institutions as block grants, providing seed money for newly independent investigators to initiate cancer research projects.

- **Eligibility**

The principal investigator of the grant, who will also serve as the chair of the local IRG Committee, should be a senior faculty member.

- **Funding**

Grants to institutions cover one to three years, average \$120,000 per year and may be renewed.

Mission Boost Grants (MBG) are opportunities for ACS grantees to seek additional (“boost”) resources for innovative high-risk/high-reward projects. MBGs potentially offer two stages of funding.

The **Primary Boost** requires the investigator to develop outcome-specific, unequivocal milestones that reduce the risks of studying a new drug, device, or procedure in patients.

- **Eligibility**

Current and former ACS grantees with innovative projects who:

1. Have held or currently hold one of the following grants (or previous versions of such awards): Research Scholarship Grant (RSG), Mentored Research Scholar Grant (MRSG), Cancer Control Career Development Award (CCDA), or Pilot and Exploratory Projects in Palliative Care (PEP) Award.

2. Have held one of the above ACS grants for a minimum of one year. *Note:* For current ACS grantees, we recommend delaying submission of letter of intent (LOI) until the last year of the grant, since part of the LOI review may include consideration of discoveries made under ACS support; and
3. Are currently independent, full-time faculty at a not-for-profit, US-based research institution that has facilities and support to enable preclinical and clinical studies.

- **Funding**

A maximum of \$100,000 direct, plus 20% indirect costs per year and may be requested for up to two years (Total: \$240,000).

The *Secondary Boost* supports testing in cancer patients.

- **Eligibility**

Only MBG recipients who have completed and submitted Primary Boost milestones for approval.

- **Funding**

A maximum of \$300,000 direct plus 20% indirect costs (Total: \$360,000) and may be requested for up to 18 months.

Pilot and Exploratory Projects in Palliative Care of Cancer Patients and their Families

support investigators performing research studies to test interventions, develop research methodologies, and explore novel areas of research in palliative care of cancer patients and their families. Applications will be accepted via the Pilot and Exploratory Grants Mechanism.

- **Eligibility**

Doctoral-level investigators in areas of palliative care.

- **Funding**

The maximum award is for two years and up to \$60,000 per year (direct costs) plus 20% indirect costs.

MENTORED TRAINING GRANTS

Postdoctoral Fellowships fund training for a career in cancer research for researchers with a doctoral degree.

- **Eligibility**

Researchers who are US citizens or permanent residents and within three years of receiving a doctoral degree.

- **Funding**

Awards cover \$52,000, \$54,000, and \$56,000 for the first, second, and third years respectively. Fellows eligible for only two years may request progressive stipends of \$54,000 and \$56,000, respectively. **One-year fellowships are no longer offered but**

resubmissions of one-year fellowships are grandfathered in and a stipend request of \$56,000 is allowed. In addition, there is a \$4,000 per year fellowship allowance. Finally, \$1,500 will be provided in the last year for travel costs, either to the biennial ACS Jiler Professors and Fellows Conference or to another scientific meeting in the US.

Clinician Scientist Development Grants support protected time to allow junior faculty who see patients to be mentored and participate in research training, thus aiding their development as independent clinician scientists. These investigators pursue questions relevant to improving health across the cancer research continuum.

- **Eligibility**

Applicants must be US citizens or permanent residents, full-time faculty, and within the first six years of their initial faculty appointment. They must also have a clinical doctoral degree, an active license to provide patient care, and have a role in patient care.

Applicants who have received institutional career development awards (e.g., NIH K12) are eligible. Recipients of individual career development awards such as an NCI K07, K08 or K23 grants are not eligible for the CSDG.

- **Funding**

Awards range from three to five years and up to \$135,000 per year (direct costs), plus 8% allowable indirect costs. A maximum of \$10,000 per year for the mentor(s) (regardless of the number of mentors) may be included in the \$135,000.

HEALTH PROFESSIONAL TRAINING GRANTS

Physician Training Awards in Cancer Prevention are reserved for institutions. They support physician training in accredited preventive medicine residency programs that provide cancer prevention and control research and practice opportunities.

- **Eligibility**

Applications are generally submitted by the program director from accredited general preventive medicine or occupational and environmental residency programs.

- **Funding**

Awards cover four years with a total amount of \$300,000, based on an average of \$50,000 per resident training year. These grants can be competitively renewed.

Doctoral Training Grants in Oncology Social Work support doctoral students conducting research related to oncology social work.

- **Eligibility**

Students with a master's degree in social work enrolled in a doctoral program at an accredited school of social work.

- **Funding**

Initial two-year grants provide a stipend of \$20,000 per year with the possibility of a two-year renewal.

Master's Training Grants in Clinical Oncology Social Work, awarded to institutions, support training for second year master's degree students in oncology social work.

- **Eligibility**

Applicants are MSW-prepared field instructors at clinical placement sites that are affiliated with accredited schools of social work with health care or mental health care concentrations and provide students the opportunity to concentrate in pediatric or adult oncology.

- **Funding**

The grant term is two years with annual funding of \$12,000 (up to \$10,000 for the student \$2,000 for faculty professional development). These grants can be competitively renewed.

Doctoral Degree Scholarships in Cancer Nursing support study in a doctoral degree program in nursing or a related area, preparing the graduate for a career as a cancer nurse scientist.

- **Eligibility**

Licensed registered nurses enrolled in an accredited academic institution that can award a doctoral degree.

- **Funding**

The initial award is for two years and \$15,000 per year; it may be renewed for an additional two years.

Graduate Scholarships in Cancer Nursing Practice support graduate students pursuing a master's degree in cancer nursing or a doctorate of nursing practice.

- **Eligibility**

Licensed registered nurses applying to or enrolled in accredited schools of nursing.

- **Funding**

Awards may be for up to two years with a stipend of \$10,000 per year.

PROFESSOR AWARDS

Professor Awards provide unique research opportunities that foster creativity and innovation in cancer research. Professor Awards provide flexible funding for individuals who have made seminal contributions that have changed and will continue to change the direction of cancer or cancer control research.

Research Professor Awards support outstanding investigators in cancer research.

Clinical Research Professor Awards support outstanding investigators in areas of clinical, psychosocial, behavioral, health policy, or epidemiologic cancer research.

- **Eligibility**

Applicants for either award must have attained the rank of full professor, but for no more than 15 years at this rank. The annual deadline is April 1 for Research Professor Awards and October 15 for Clinical Research Professor Awards.

- **Funding**

Both awards are for five years at \$80,000 per year, in the total amount of \$400,000 in unrestricted funds, and may be renewed once.

INTERNATIONAL PROGRAM

Audrey Meyer Mars International Fellowships in Clinical Oncology supports one year of advanced training in clinical oncology at participating United States (US) cancer centers.

- **Eligibility**

Non-US citizens – qualified physicians and dentists from other countries, particularly those where advanced oncology training is not readily available.

- **Funding**

This program provides up to US \$65,000 for one year.

SPECIAL INITIATIVE

PRIORITY FOCUS ON HEALTH EQUITY RESEARCH IN THE CANCER PREVENTION AND CONTROL RESEARCH GRANTS PROGRAM

The ACS Extramural Research and Training Grants Department identifies research addressing cancer health equity (using the ACS definition) and health disparities as a priority within the Cancer Prevention and Control Research Program. This includes research:

1. To understand, identify, and/or define modifiable and unjust factors that contribute to or sustain inequity (e.g. resources, access to care, behaviors, quality of care); and
2. That leads to a sustained reduction in disparities and/or equitable outcomes in cancer.

Background:

Despite the steady overall decline in cancer incidence and mortality rates in the United States, not all population groups have benefited equally. Differences in rates of incidence, prevalence, mortality, and related adverse health conditions among sub-groups of the US population (health disparities) are closely linked to social or economic disadvantage. To the extent these differences in health status across social groups are unfair, avoidable, and preventable, they constitute health inequities. Health inequities and health disparities may be characterized by age, gender, disability status, ethnicity/race, nativity and immigrant status, geography, income, language, social class, or sexual orientation. If application of the existing knowledge about cancer prevention, early detection, and treatment were delivered equitably, these disparities in cancer could be substantially reduced or eliminated. Achieving health equity by establishing inclusive

health and social systems involving equitable treatment for all, and recognition of the ongoing impact of past inequities, creates conditions for improving health outcomes.

The American Cancer Society has a longstanding history of advocacy, education, community outreach, and research in the area of cancer disparities and cancer health equity. To accelerate progress in cancer research, we believe that cancer health equity involves everyone having the fair and just opportunity to prevent, find, treat, and survive cancer. Appreciating that social inequities create health inequities, we recognize that multi-sector action is needed to address societal issues such as poverty, education, social injustices, unequal distribution of resources and power, which underpin profound inequities. These macro-environmental conditions where people are born, grow, live, work and age along with the available systems supporting health are known as the social determinants of health. Integral to these influences are the economic, political, and social policies that exist in and shape communities. The social determinants of health are interrelated and extend across the life span to impact health.

Social determinants of health include environmental conditions – the influence of the world in which people are born, live, play, thrive, work, and worship and the availability of health care systems. The economic, political, and social policies that shape communities are integral to these influences.

Individual determinants of health include biology, genetics, and individual behaviors and characteristics. Health disparities are related to age, gender, disability status, ethnicity, race, geography, income, language, social class, and sexual orientation. The National Stakeholder Strategy for Achieving Health Equity, supported by the U.S. Department of Health and Human Services Office of Minority Health, presents an action-oriented blueprint to move the nation toward achieving health equity, by combating health disparities with a comprehensive, community-driven approach. The ACS has overlapping goals and is committed to addressing cancer health equity through research, education, advocacy, and service.

The ACS Extramural Research and Training Grants Department identifies research addressing health equity as a priority, and RSG grant applications to its Cancer Control and Prevention Research Program are welcome from principal investigators at any career stage. These should focus on eliminating disparities through either psychosocial and behavioral research, or in health policy and health services research.

Applications using one of the following mechanisms will also be accepted; the standard eligibility requirements apply:

- Postdoctoral Fellowship
- Clinician Scientist Development Grant
- Research Scholar Grant
- Clinical Research Professor Award

All applicants must explicitly specify the following within the application:

1. Relevance to cancer generally and cancer disparities specifically;
2. How findings from the proposed research will substantially improve equity in access to cancer prevention, early detection, diagnosis, and/or treatment services; and

3. How findings may be applied to more quickly advance efforts to reduce cancer burden or costs, improve quality of care or quality of life, and/or save more lives.

All cancer health-equity applications must target two or more determinants of health. Research Scholar Grant applicants proposing large multi-level cancer health equity studies must include two or more levels of influence (individual, interpersonal, organizational, community, or public policy). Multilevel studies must also focus on two or more social determinants of health that cause inequities. Research may include aspects of the following domains: economic; education; neighborhood and built environment; policy; social and community context; or factors impacting access to and provision of high-quality care. Proposed research should lead to a clear path toward or to test a multi-level intervention focused on a sustained reduction in disparities and/or advance efforts to achieve health equity and equitable outcomes in cancer. These large studies must be adequately powered and have enough sample size to evaluate the proposed research aims.

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GRANT PROGRAM OFFICES

HEALTH PROFESSIONAL TRAINING IN CANCER CONTROL

Virginia Krawiec, MPA, Scientific Director

This program supports nurses, physicians, and social workers pursuing training in cancer prevention and control practice. The goal is to accelerate the wide application of research findings by increasing the number of these professionals with expertise and career commitment to cancer control.

MOLECULAR GENETICS AND BIOCHEMISTRY OF CANCER

Michael Melner, PhD, Senior Scientific Director

This program focuses on genes involved in cancer and the role their alterations (mutations, deletions, and amplifications) play in the process. Of particular interest is the examination of the molecules involved in cancer (proteins, nucleic acids, lipids, and carbohydrates) and how their activities affect these diseases. The program highlights new targets for prevention, detection, and treatment of cancer.

CANCER CELL BIOLOGY AND METASTASIS

Charles Saxe, PhD, Senior Scientific Director

The primary goal of this program is to provide an understanding of the nature of cancer cells, so they can be more effectively controlled and eliminated. Emphases include understanding the fundamental controls of normal and cancer cells, with a focus on how cells regulate when to grow, when to divide, and when to die; how cells create an identity; how cells relate to the local environment and to other cells; and how cells regulate when and how to move from one site to another.

TRANSLATIONAL CANCER RESEARCH

Lynne Elmore, PhD, Scientific Director

This program focuses on the interface between laboratory investigations and human testing. The program supports investigations of the roles of the microbiome and infectious diseases in cancer; microbial-based cancer therapies; the discovery, synthesis, and delivery of cancer drugs; the creation and use of animal models of cancer; and biomarker identification/development.

CLINICAL CANCER RESEARCH, NUTRITION, AND IMMUNOLOGY

Susanna Greer, PhD, Scientific Director

This program focuses on therapies for cancer. It includes basic, preclinical, clinical, and epidemiological investigations of immunotherapy, inflammatory responses, immunosurveillance, and innate and adaptive immune responses. Emphases include development and application of new imaging and bioanalytical tools and techniques, and how the exposome, nutrition, physical activity, and environment impact cancer prevention, initiation, progression, and treatment.

CANCER CONTROL AND PREVENTION RESEARCH

Elvan C. Daniels, MD, MPH, Senior Scientific Director

This program focuses on the development and testing of interventions to influence health behaviors and health-care delivery. Research projects in this program focus on cancer risk reduction and delivery of high-quality health promotion, screening, early detection, and treatment services. The program also includes projects directed at health services, outcomes, and policy research to assess the effectiveness of interventions and the impact of policies on access to care, quality of care, and costs of care. Special emphasis is placed on health-equity research addressing disparities in disadvantaged groups and the social determinants of health that drive inequities.

2. AUTHORITY FOR MAKING GRANTS

All ACS grants and awards are made by the Chief Executive Officer on behalf of the Society's Board of Directors.

3. SOURCE OF FUNDS

The ACS obtains its funds principally from public donations collected annually by our many dedicated volunteers. To disseminate information about the Society's Extramural Research and Training Grants Program to volunteers and the public, grantees may occasionally be asked to give brief presentations to professional and lay audiences.

4. WHO MAY APPLY

Applicants for the Clinician Scientist Development Grant and Postdoctoral Fellowships must be, at the time of application, United States citizens, or permanent residents. There are no citizenship requirements for any other grants.

The Society will allow only one individual designated as principal investigator, responsible and accountable for the overall conduct of the project; the Society does not recognize co-principal investigators.

Although applicants may apply for multiple awards, a grantee may not be the principal investigator on more than one ACS grant at any time. Exceptions are made for recipients of grants in response to RFAs and for principal investigators of Institutional Research Grants, Mission Boost Grants, or TheoryLab pilot projects.

5. TOBACCO-INDUSTRY FUNDING POLICY

Scientific investigators or health professionals who are funded for any project by the tobacco industry, or whose named mentors are so funded, are not eligible for American Cancer Society (ACS) grants. Any of these who accept tobacco-industry funding during the term of a grant must inform the Society, whereupon the grant will be terminated.

Tobacco industry funding includes:

- Funds from a company that is engaged, or whose affiliates are engaged, in the manufacture of tobacco produced for human use;
- Funds in the name of a tobacco brand, whether or not the brand name is used solely for tobacco goods; and

- Funds from a body set up by the tobacco industry or by 1 or more companies in the industry.

The following do not constitute tobacco industry funding:

- Legacies funds from tobacco industry investments (unless the name of a tobacco company or cigarette brand is associated with them);
- Funds from a trust or foundation established with assets related to the tobacco industry, but which no longer have any connection with the industry, even though the entity may bear a name that for historical reasons is associated with the tobacco industry.

Tobacco industry funding is defined for purposes of Society grants and awards applicants and recipients as money provided or used for any costs for research, including personnel, consumables, equipment, buildings, travel, meetings, and conferences, or operating costs for laboratories and offices. It does not include meetings or conferences unrelated to a particular research project.

6. COLLABORATIONS WITH ACS INTRAMURAL SCIENTISTS (IF APPLICABLE)

1. If an extramural scientist is planning a collaboration with an ACS intramural scientist, and they meet all other eligibility requirements, they may be eligible to submit an application. Such collaborations are not required.
2. In most cases, the use of ACS research resources requires that at least one ACS intramural scientist be included as a collaborator on the grant application. Therefore, prior to submission of an application, the collaboration between extramural scientists and intramural scientists must be established according to the policies and procedures of ACS Intramural Research.
3. Intramural scientists and their staff may participate in grants and contracts in many ways, including:
 - Serving as unpaid consultants, collaborators, co-investigators, or mentors. Intramural scientists may not serve as a principal investigator on an ACS grant or contract.
 - Contributing to the conceptualization, design, execution, or interpretation of a research study.
 - Having primary responsibility for a specific aim within a standard research grant mechanism.
 - Developing or contributing data for an extramural collaboration.
 - Participating in a multi-institutional collaborative arrangement with extramural researchers for clinical, prevention, or epidemiological studies.
4. ACS intramural scientists may not receive salary support, travel expenses, or other funds from ACS-funded grants or contracts.
5. Intramural and extramural scientists may have access to reagents, laboratory equipment, and/or data to conduct the extramurally funded portion of the research, as established in their collaborative agreement.

6. While intramural scientists may write a description of the work to be performed by the intramural department, they may not write an applicant's grant application or contract proposal. However, the intramural scientist(s) should review and approve sections relevant to the collaboration.
7. ACS intramural scientist participation must comply with disclosure, non-disclosure, and conflict-of-interest regulations.
8. ACS intramural scientists must file annual and final research reports related to their activities associated with any grant or contract awarded through the Extramural Research Department.

¹Adapted from document NIH Policy 54815 Implementation of Cooperative Agreement, "Funding of Intramural Research Program/Extramural Research Program Collaborations" [<http://sourcebook.od.nih.gov/ethic-conduct/fund-irp-erp`-3-00.htm>], and "Opportunities and Guidelines to Facilitate Scientific Collaborations" [<http://www.niaid.nih.gov/researchfunding/grant/Pages/extraintracollab.aspx>]

7. ELIGIBLE INSTITUTIONS AND INSTITUTIONAL RESPONSIBILITIES

The Society's grants and awards are made to not-for-profit institutions located within the United States and its territories. A not-for-profit institution is one that can provide upon request:

- A current letter from the Internal Revenue Service conferring 501(c)(3) status;
- Evidence of an active research program with a track record of extramural funding and publications in peer reviewed journals; and
- Documentation of appropriate resources and infrastructure to support the proposed research. These include, but are not limited to:
 - Adequate facilities and services;
 - Fiscal and grants management infrastructure to ensure compliance with ACS policies, and with federal policies regarding protections for human and animal subjects (e.g., a sponsored-projects office or a contract with an IRB or IACUC);
 - A process for appointment and promotion equivalent to those in academic settings for staff scientists; and
 - Evidence of education, training, and mentoring for fellows and beginning researchers appropriate to the grant mechanism.

Grant applications will not be accepted, nor will grants be made, for research conducted at

- For-profit institutions;
- Federal government agencies (including the National Laboratories);
- Organizations supported entirely by the federal government (except postdoctoral fellowship applications);
- Organizations that primarily benefit federal government entities, such as foundations operated by or for the benefit of Veterans Affairs Medical Centers (VAMC). However, qualified academic institutions may submit applications on behalf of a VAMC if a Dean's Committee Memorandum of Affiliation is in effect between the 2 institutions.

The American Cancer Society does not assume responsibility for the conduct of the activities that the grant supports, or for the acts of the grant recipient, because both are under the direction and control of the grantee institution and subject to its medical and scientific policies.

Every grantee institution must safeguard the rights and welfare of individuals who participate as subjects in research activities by reviewing proposed activities through an institutional review board (IRB), as specified by the National Institutes of Health Office for Human Research Protections of the US Department of Health and Human Services.

Furthermore, applicants, applicant institutions, and grantee institutions must adhere to DHHS guidelines as well as ACS guidelines regarding conflicts of interest, recombinant DNA, scientific misconduct, and all other applicable ACS policies and procedures.

To signify agreement by the institution to all ACS policies and procedures, an application for a grant must bear the signatures of the official authorized to sign for the institution and the appropriate department head. Additional signatures are at the discretion of the institution.

The institution is responsible for verifying that all documentation related to the application and grant is correct, including all representations made by any named researcher (e.g. position or title). Further, the institution is responsible for verifying that the applicant is either a US citizen or permanent resident with a Resident Alien Card (“Green Card”) where applicable. If the award does not require US citizenship or permanent residency, the institution is responsible for documenting the applicant’s legal eligibility to work in the US for the duration of the award. For Postdoctoral Fellowships, if the terminal degree is granted after submission of the application, the institution must verify that the degree has been awarded prior to grant activation.

It is the responsibility of the institution to immediately report to ACS any finding that any information presented to ACS in connection with the application and/or grant is false. It is also the responsibility of the institution to immediately report to ACS any action including recertification, loss of certification, breach of contract, misconduct, or change in employment status for a named researcher with the institution. This includes administrative leave, which may occur during the term of any award pertinent to the work described in the grant application.

Failure to abide by the terms above, or by any other ACS policy or procedures, may result in suspension or cancellation of the grant, at the sole discretion of ACS.

By accepting an American Cancer Society award, you agree to the Guidelines for Maintaining Research and Peer Review Integrity found in the Appendix of these policies.

8. PEER REVIEW OF APPLICATIONS

The Society's scientific directors distribute applications to the most appropriate peer review committee, and then assign each application to at least 2 committee members for independent and confidential review. Each committee generally has between 12 and 25 members who are leaders in their areas of expertise, plus up to 3 stakeholders. A stakeholder is an individual usually without formal training as a scientist or health professional who has a strong personal interest in advancing the effort to control and prevent cancer through research and training. This

interest could stem from a personal experience with the disease, such as survivorship, a family cancer experience, or caregiving.

Peer review committees use application evaluation criteria that vary depending on the grant mechanism. See individual instructions for details.

After the peer review committee discusses and votes to prioritize the most competitive applications, it provides its recommendations, along with critiques of the applications and fundable scores, to the Council for Extramural Research.

After considering the relative merit of the applications, the amount of available funds, and the Society’s objectives, the Council determines which grants will be funded during each cycle. No voting member of a peer review committee or of the Council may be a member of the Society’s staff or Board of Directors.

In general, applications for research grants that are not funded may be revised and resubmitted twice; Postdoctoral Fellowship applications may only be resubmitted once. Resubmitted applications are reviewed in the same detail as new applications and compete with them on an equal basis. (See instructions for resubmission of applications.)

9. APPLICATION DEADLINES

In addition to one hard copy, applications for grants and awards must be submitted electronically via proposalCENTRAL on the American Cancer Society website www.cancer.org (see Instructions). Electronic applications must be submitted by 5:00 PM ET on the specified deadline date, and a paper copy is due one business day later. If the deadline falls on a weekend or holiday, applications will be accepted the following business day.

No supplemental materials will be accepted after the deadline unless requested by ACS staff or reviewers.

DEADLINE, REVIEW, NOTIFICATION, AND ACTIVATION SCHEDULE

GRANTS	Application Deadline	Peer Review Meeting	Preliminary Notification	Council Meeting	Grantee Notification	Activation
Research Scholar Grant	April 1 October 15	June January	August March	September March	October April	January 1 July 1
Mentored Research Scholar Grant	DISCONTINUED; See Clinician Scientist Development Grant					
Clinician Scientist Development Grant	April 1 October 15	June January	August March	September March	October April	January 1 July 1

Postdoctoral Fellowship	April 1 October 15	June January	August March	September March	October April	January 1 July 1
Pilot and Exploratory Projects	April 1 October 15	June January	August March	September March	October April	January 1 July 1
Institutional Research Grant	April 1	June	August	September	October	January 1
Physician Training Award in Cancer Prevention	April 1	June	August	September	October	January 1
Research Professor Award	LOI Deadline: February 1 Application Deadline: April 1	June	NA	September	October	January 1
Clinical Research Professor Award	LOI Deadline: August 1 Application Deadline: October 15	January	NA	March	April	July 1
Mission Boost Grant	LOI Deadline: March 1 Application Deadline: July 15	August	September	September	October	January 1
Doctoral Training Grant in Oncology Social Work	Application Deadline: October 15	January	March	March	April	July 1
Master's Training Grant in Clinical Oncology Social Work	October 15	January	March	March	April	July 1
Cancer Control Career	DISCONTINUED; See Clinician Scientist Career Development Grant					

Development Award						
Doctoral Degree Scholarship in Cancer Nursing	October 15	January	March	March	April	July 1
Graduate Scholarship in Cancer Nursing Practice	October 15	January	March	March	April	July 1
Audrey Meyer Mars International Fellowships in Clinical Oncology	October 15	January	March	March	April	July 1

10. NOTIFICATION OF APPLICATION RECEIPT AND REVIEW

Approximately one month after receipt of the application, applicants will receive an email acknowledgment providing an application number, the assigned peer review committee, and the name of their Scientific Director with contact information. This email will be sent to the address in the professional profile supplied at the time of submission in proposalCENTRAL. Be certain the email address listed in your professional profile is active, since it will be used to notify you throughout the review and award process.

Preliminary Notification and Likelihood of Funding. Following review of an application, preliminary information regarding its status will be emailed, with links to copies of the reviewers' critiques. This notification will also indicate the likelihood of funding, described by one of the following phrases:

- Your application has been recommended for funding.
- We cannot predict the likelihood of funding at this time.
- Your application is not likely to be funded.

All final funding decisions are made by the Council for Extramural Research, which typically meets in March and September.

The Scientific Director and Program Manager will shepherd your application through the entire process. Applicants may call the Extramural Research Department at any time during the cycle; after carefully considering the critiques, applicants are encouraged to contact their Scientific Director to discuss their review. Applicants considering resubmission are strongly encouraged to reach out in advance of the next deadline.

11. GRANT MANAGEMENT AND PAYMENTS

New grantees will receive a packet of information with instructions for activating the award. The activation form as well as other important information about the grant can also be found at <https://proposalcentral.com/> (Select the Award tab to see the Post Award Management site.)

Grant payments will be made at the end of each month, except for nursing scholarships and social work grants, which are made once at the beginning of the year. The American Cancer Society makes all payments to the sponsoring institution and mails them to the address shown on the grant activation form.

Acknowledgement of payment by the sponsoring institution is not required. Continued funding by ACS throughout the grant period is contingent upon the institution's compliance with all terms related to the grant; failure to comply with all of the grant terms may result in a suspension or cancellation of the grant, to be determined by ACS at its sole discretion.

Personnel compensated in whole or in part with funds from the American Cancer Society are not employees of the Society. Consequently, institutions are responsible for issuing appropriate IRS tax filings for all individuals receiving compensation from ACS grants, and for withholding and paying all required federal, state, and local payroll taxes for such compensation. Any tax consequences are the responsibility of the individual recipient and the sponsoring institution. We advise all grant and award recipients to consult a tax advisor regarding the status of their awards.

12. ANNUAL AND FINAL PROGRESS REPORTS

The following policies apply to Research Scholar Grants, Pilot and Exploratory Projects in Palliative Care of Cancer Patients and their Families, Mentored Research Scholar Grants, Clinician Scientist Development Grant, and Postdoctoral Fellowships. For all other grants, see the appropriate sections on Required Progress Reports. Annual and final reports represent a critical part of responsible stewardship of the donated dollars, and we greatly appreciate your assistance in fulfilling this important commitment to our donors. Information from these reports as well as possibly from the structured technical abstract may be shared with donors under a Non-Disclosure Agreement. Therefore, do not include proprietary or confidential information.

- A. Both nontechnical and scientific progress reports are to be submitted each year within 60 days after the first and subsequent anniversaries of the start date of the grant. Final reports are due within 60 days after the grant has terminated. Forms for these reports can be found at <https://proposalcentral.com/> under the "Deliverables" tab.
- B. The final report should cover the entire grant period. In the event a grant has been extended without additional funds, the final report is not due until 60 days after the official termination date of the grant. If the grant is terminated early, a final report must still be completed within 60 days of the termination date.
- C. Grantees must submit reports in a timely manner. If this is not possible, a grantee must make a written request to extend the reporting deadline. Noncompliance may result in the withholding of payment on all grants in effect at the recipient institution until reports are received.

- D. Please note that up-to-date annual reports are required when requesting any grant modifications, including transfers or no-cost extensions.

13. PUBLICATIONS AND OTHER GRANT-RELATED COMMUNICATIONS

When and how to acknowledge your ACS grant:

Publications resulting from research or training activities supported by the American Cancer Society must contain the following acknowledgment: “Supported by [name of grant and number] from the American Cancer Society.” When there are multiple sources of support, the acknowledgment should read “Supported in part by [name of grant and number] from the American Cancer Society,” along with references to other funding sources.

The Society’s support should also be acknowledged by the grantee and the institution in all public communication of work resulting from this grant, including scientific abstracts (where permitted), posters at scientific meetings, press releases or other media communications, and internet-based communications.

Although there is no formal ACS approval process for publications by Society grantees, it is helpful to notify your Scientific Director when manuscripts have been accepted for publication. This will allow ample time to for additional public or Society-wide notifications. If your institution plans a press release involving any of your Society-supported research, please notify the ACS communications representative (phone number on your award letter) or your Scientific Director in advance.

ACS grants to you a limited, revocable, non-transferable license to use the ACS logo (as shown below) in association with your funded work. We encourage you to use it on scientific posters, Power Point presentations, and any other visual presentation about your funded work where the ACS is noted as a funding source. In turn, you agree to provide any materials featuring the ACS logo upon our request.

Permission to use the logo is limited to the uses outlined in the above paragraph. It should not imply ACS endorsement of products such as guidelines, websites, software for mobile devices (apps), tool kits, and so on.



14. FINANCIAL RECORDS AND REPORTS

A report of expenditures must be submitted within 90 days of the grant’s expiration date shown in the award letter; annual financial reports are not required. Any change in terms, such as a no-cost extension, will alter a report’s due date. The necessary forms can be found under the “Deliverables” tab at <https://proposalcentral.com/>.

Signatures of the principal investigator and the institution's financial officer are required. Any unexpended funds must be returned to the Society.

Grantees must submit financial reports in a timely manner. If this is not possible, a grantee must make a written request to extend the reporting deadline. Noncompliance may result in the withholding of payment on all grants in effect at the recipient institution until reports are received.

Institutions must maintain separate accounts for each grant, with substantiating invoices available for audit by representatives of the American Cancer Society. The Society is not responsible for expenditures made prior to the start date of the grant, costs incurred after termination or cancellation of the grant, commitments against a grant not paid within 60 days following the expiration date, or any expenditures that exceed the total amount of the award. (See also Section 19, "Cancellation.")

Note: The Institutional Research Grant has different reporting requirements, found in the Required Financial Reports section in the IRG policies.

15. EXPENDITURES

American Cancer Society *research* grants are not designed to cover the total cost of the research proposed or the investigator's entire compensation. The grantee's institution is expected to provide the required physical facilities and administrative services normally available at an institution.

For grants that allow indirect costs, the calculation of allowable indirect costs includes all budget items except permanent equipment. See the Instructions for allowable expenditures for Health Professional Training Grants (Nursing Scholarships, Social Work Training Grants, and Physician Training Awards in Cancer Prevention).

The Society's *research grants* do not provide funds (direct budget) for such items as:

- **Travel**
 - Foreign travel (special consideration is given for attendance at scientific meetings held in Canada).
- **Administrative**
 - Secretarial or administrative salaries.
 - Membership dues.
- **Tuition, books, and fees**
 - Student tuition and fees (graduate or undergraduate). However, tuition is an allowable expense for the principal investigator of a Clinician Scientist Development Grant.
 - Books and periodicals, except required texts for coursework in the approved training plan for Clinician Scientist Development Grants.
- **Office or laboratory setup and expenses**
 - Office and laboratory furniture.
 - Office equipment and supplies.
 - Rental of office or laboratory space.
 - Construction, renovation, or maintenance of buildings or laboratories.

- **Other**
 - Recruiting and relocation expenses.
 - Non-medical services to patients (travel to a clinical site or patient incentives are allowable expenses).

Society research and training grant funds can be used for computers for research and training purposes, which can be purchased with direct funds from the equipment budget. See specific policies for different funding mechanisms.

16. OWNERSHIP OF EQUIPMENT

Equipment purchased under American Cancer Society research grants or grant extensions is for use by the principal investigator and collaborators. Title of such equipment shall be vested in the institution at which the principal investigator is conducting the research. In the event the American Cancer Society authorizes the transfer of a grant to another institution, equipment necessary for continuation of the research project purchased with the grant funds may be transferred to the new institution, and title to such equipment shall be vested in the new institution.

17. INTELLECTUAL PROPERTY RIGHTS

As a not-for-profit organization supported by public contributions, the Society believes it has the responsibility to adopt policies and practices that enhance the likelihood that potentially beneficial discoveries and inventions will be exploited to the benefit of humankind. It is the desire of the Society that such inventions be administered in such a manner that they are brought into public use at the earliest possible time. The Society recognizes that often this may be best accomplished through patenting and/or licensing of such inventions. Accordingly, the Society has adopted the following patent policy that is binding on all Grantees and Not-for-profit Grantee Institutions (hereinafter "Grantee"), excluding postdoctoral fellowship Grantees at the National Institutes of Health and other government laboratories, for whom the applicable patent policies of the federal government shall apply. Acceptance of a grant from the Society constitutes acceptance of the terms and conditions of this policy. It is a goal of the Society that the terms and conditions of this policy not conflict with the established patent policy of the Grantee.

- A. All notices required pursuant to this policy shall be in writing, and in this policy, the following terms shall have the meaning set forth below.
 - i. "Invention" shall mean any potentially patentable discovery, material, method, process, product, program, software or use.
 - ii. "Funded Invention" shall mean any Invention made in the course of research funded in whole or in part by this Society grant.
 - iii. "Public Disclosure" shall mean any publication, presentation, offer for sale or any activity that would affect the patentability of the invention under 35 USC. § 102 or 103.
 - iv. "Net Income" shall mean gross income received by Grantee in respect of a Funded Invention less inventor distributions in accordance with Grantee policy, payments to joint

holders of Funded Invention, and unreimbursed directly assignable out-of-pocket expenses resulting from patenting and licensing for Funded Invention.

- B. Grantee shall notify the Society of each Funded Invention made by Grantee within thirty (30) days after the disclosure of the Funded Invention to Grantee's Technology Transfer Office or the equivalent thereof. Grantee shall promptly determine whether it desires to seek patent or other statutory protection for all Funded Inventions promptly after each Funded Invention is made and shall promptly inform the Society of all decisions to seek or not seek such protection. The Society shall have the right to seek patent or other statutory protection, at the Society's expense, for any Funded Invention in any country where Grantee has decided not to seek protection or has failed to file an application for such protection within six (6) months after disclosure of the Funded Invention to the Society, and, upon the Society's request, Grantee shall file for patent protection for Funded Invention in such countries as directed by Society at the Society's expense.
- C. Grantee shall promptly notify the Society of the filing and issuance or grant of any application for a patent or other statutory right for a Funded Invention and shall keep the Society reasonably informed of the status and progress of all such applications. Grantee shall pay all costs and expenses incident to all applications for patents or other statutory rights and all patents and other statutory rights that issue thereon owned by Grantee (other than as provided for in Sections B or C). Grantee shall also notify the Society at least sixty (60) days in advance of Grantee's intention to abandon any application for a patent or other statutory right for a Funded Invention or not to take action required to maintain any such application or any patent or other statutory right in a Funded Invention, in which event, at the request of the Society, Grantee shall continue patent protection for Funded Invention as directed by Society at the Society's expense (unless maintenance of such patent rights is inconsistent with Grantee's good name).
- D. Each of the Society and Grantee (the appropriate Grantee technology transfer officer managing Funded Invention) shall promptly inform the other of any suspected infringement of any patent covering a Funded Invention and of any misappropriation, misuse, theft or breach of confidence relating to other proprietary rights in a Funded Invention. Grantee and Society will discuss in good faith further action to be taken in this regard.
- E. Grantee shall notify the Society within thirty (30) days of grant of a license, lease, or other revenue generating agreement involving a Funded Invention. In the event that Grantee fails to license a Funded Invention within five (5) years from the issuance of a patent for the Funded Invention and the Grantee has determined no viable means of commercialization for Funded Invention, Grantee shall license the Funded Invention, with the right to sublicense, to the Society (under standard Grantee license terms on a royalty free basis). However, should the Society receive any revenue from sublicensing the Funded Invention, it will share that revenue with Grantee on a mutually acceptable basis.
- F. Grantee will license a Funded Invention in accordance with Grantee Policy and established practices.

- G. i. The Society waives the receipt of income until the Net Income from the Funded Invention exceeds \$500,000.
- ii. Once the Net Income from a Funded Invention exceeds \$500,000, Grantee shall pay the Society annually a percentage of the Net Income from the Funded Invention that is proportionate to the Society's proportion of the financial support for the research that resulted in the Invention. Such royalty payment shall be accompanied by an appropriate statement of account detailing the amount and showing the calculation of Net Income received by Grantee during the preceding year. The Society shall have the right to audit the Grantee's books and records annually, in order to verify the Net Income derived annually from any Funded Invention.
- iii. The percentage of Net Income due the Society from a Funded Invention shall be determined by the parties within 90 days of the date the Society is notified by the Grantee (to be extended by mutual agreement of both parties) pursuant to Section E above of the grant of a license, lease or other revenue generating agreement involving the Funded Invention.

If the parties are unable to agree on the percentage of Net Income payable to the Society or any amount owed to Grantee pursuant to Paragraph E above, the dispute (the "Dispute") shall be resolved as follows:

One of the parties shall request (the "Negotiation Request") that each of the parties appoint a designated executive management representative to meet for the purpose of endeavoring to resolve such Dispute. The designated executive representatives, who shall not have been directly involved in the initial negotiations, shall discuss the Dispute and negotiate in good faith in an effort to seek a resolution. During the course of such negotiation, all reasonable requests made by one party to the other for information will be honored so that each of the parties may be fully advised regarding the Dispute. If the designated executive representatives are unable to resolve the Dispute within 30 days after the Negotiation Request, the parties shall mediate the Dispute with a mutually acceptable mediator within the 30-day period beginning 31 days after the Negotiation Request. If the Dispute is not resolved by mediation within 60 days after the Negotiation Request, either party may initiate arbitration by delivering an arbitration demand to the other party (initiator of arbitration will travel to venue of other party), and the Dispute shall be settled by arbitration in accordance with the Commercial Arbitration Rules of the American Arbitration Association ("AAA"), except that

- (a) there shall be one arbitrator mutually agreed upon by both parties within 30 days after initiation of arbitration and if the parties are unable to agree upon an arbitrator, the arbitrator shall be appointed by AAA;
- (b) neither party may submit more than 20 interrogatories, including subparts;
- (c) neither party shall be entitled to take more than two depositions and no deposition shall last more than two hours;

- (d) all discovery shall be concluded within 90 days of serving the arbitration demand;
- (e) each party shall bear its own costs and expenses and attorney's fees and an equal share of the arbitrator fees and any administrative fees of the arbitrator; and
- (f) arbitration shall not be utilized if Grantee is prohibited by law from submitting itself to binding arbitration.

The award of the arbitrator shall be binding, and judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction thereof.

Please note that the American Cancer Society is unable to renegotiate the terms of this agreement with any individual institution.

18. REQUEST FOR GRANT MODIFICATIONS

All Forms can be found under the Deliverables tab at <https://proposalcentral.com/>.

- **Extension**

A request for the extension of a grant term without additional funds must be submitted in writing to the Scientific Director 60 days before the grant's expiration date. Include an estimate of the funds to be carried over into the extension, and an explanation for the delay—i.e., which specific aims remain incomplete and why. In general, a grant may be extended for up to one year if a programmatic need is justified and the funds to be carried over into the no-cost period do not exceed an amount equivalent to one year of support (direct plus indirect costs).

- **Leave of absence**

Requests for a leave of absence will be handled on a case-by-case basis. Please contact the Scientific Director at least 30 days prior to the proposed beginning of leave.

- **Request to transfer institution**

A grantee who plans to change institutions during the grant period must contact the Scientific Director to initiate the transfer request process.

Please note that up-to-date annual reports are required prior to approval of any grant modifications including transfers and no-cost extensions.

The Society reserves the right to deny requests for extensions, leaves of absence, or transfers.

19. CANCELLATION OF GRANT

If a grant is to be canceled prior to the original termination date, contact your Scientific Director and submit the Request for Cancellation form found at https://proposalcentral.com. The American Cancer Society may cancel a grant at its sole discretion if the institution fails to comply with all of the terms and obligations related to the grant.

In the event a grant is canceled; the institution is only entitled to the prorated amount of the award accumulated between the start and termination dates. If a Postdoctoral Fellowship is cancelled prior to its end date, payments of the fellowship allowance will be prorated on a monthly basis. Please see the specific policies for Institutional Research Grants regarding the cancellation of a pilot project grant. The Society assumes no responsibility for expenditures in excess of the prorated amount.

For Doctoral Training Grants in Oncology Social Work, Graduate Scholarships in Cancer Nursing Practice, and Doctoral Degree Scholarships in Cancer Nursing, withdrawal from the graduate program requires cancellation of the grant. Please see the specific policies for Master's Training Grants in Clinical Oncology Social Work and Physician Training Awards in Cancer Prevention for instructions regarding a student or resident who does not complete training.

If an award is canceled after the initiation of the grant period, a final report will be due within 60 days of the termination date describing the work completed up to that point.

20. SPECIFIC POLICIES BY GRANT MECHANISM

RESEARCH GRANTS

RESEARCH SCHOLAR GRANTS

1. RESEARCH SCHOLAR GRANTS DESCRIPTION

Research Scholar Grants (RSG) provide support for independent, self-directed researchers and clinician scientists who are investigators licensed to provide patient care and trained to conduct research. They pursue research questions across the cancer research continuum. These grants typically cover the cost of salaries, consumable supplies, and other miscellaneous items required in the research. Applicants must be independent, self-directed researchers or clinician scientists, and their institution must provide space and other resources customary for independent investigators.

The application must convey the commitment of the institution to the applicant and the proposed research activities. The Society will only recognize one principal investigator, who is responsible and accountable for overseeing the project.

The specifications chart below provides program highlights. Note that most applicants are beginning investigators; however, for some special funding initiatives, eligibility requirements do not apply. More information is provided in Section 2.

SPECIFICATIONS CHART: Research Scholar Grant			
Research Scholar Grants (RSG)	Eligibility Criteria	Term of Award	Award Budget
Research on Basic, Preclinical, Clinical, Epidemiology, Psychosocial, and Behavioral Studies, and Research in Palliative Care and Symptom Management	Independent investigators within first six years of independent career, within a total of 12 years from the award of the terminal degree, and with no more than one current R01[-like] grant Within eight years of independent career for clinician scientists who remain active in clinical care.	Four years, non-renewable	165K per year + 20% indirect costs
RSG on the Role of Health Policy and Health Insurance in Improving Access to Care and Performance of Cancer Prevention, Early Detection, and Treatment Services	Independent investigators at <i>any</i> stage of their career with any level of prior funding	Four years non-renewable	165K per year + 20% indirect costs
		Three years or five years	<i>Rapid cycle studies or large multi-level cancer health equity studies in response to the RFA for insurance studies may be up to \$200K per year + 20% indirect costs</i>
RSG in Priority Program of Cancer Control: Health Equity Research	Independent investigators at <i>any</i> stage of their career with any level of prior funding	Four years non-renewable <i>Large multi-level research studies*: Up to five years, non-renewable</i>	165K per year + 20% indirect costs <i>Large multi-level research studies*: up to \$200K per year + 20% indirect costs</i>

* *Multi-level cancer health equity studies must target two or more social determinants of health and address two or more levels of influence.*

2. ELIGIBILITY RULES

Who is Eligible: Independent investigators in the first six years of an independent research career or faculty appointment are eligible to apply. Eligibility is extended to eight years for clinician scientists who remain active in clinical care.

Exception for Cancer Control and Prevention Research: RSG applicants submitting a research project proposal to the Cancer Control and Prevention Research Program focusing on either: 1) Health Policy/Health Services Research or 2) Achieving Cancer Health Equity, may be at any career stage.

A. INDEPENDENCE

When peer review committees evaluate an RSG applicant, they look for evidence of administrative and scientific independence.

Administrative independence is typically demonstrated by a full-time faculty appointment (normally equivalent to Assistant Professor); a tenure-track position; allocated office and/or laboratory space; a start-up package; and institutional commitment defined and verified in a letter from a department chair or equivalent.

Evidence of *scientific independence* could include prior grant funding and senior-author publications. This award will be made only for project-related work that is wholly directed by the applicant.

Specific evidence of an applicant's independence may include:

- **Degree**—PhD, MD, or terminal degree in the field of specialty.
- **Title/Appointment**—Assistant Professor (or higher); Research Assistant Professor; or comparable position (i.e., Assistant Member). Individuals with the rank of Instructor may apply if that rank confers principal investigator status at their institution.
- **Training Experience**—in most disciplines, applicants will have completed a period of postdoctoral or other research training.
- **Space**—committed independent research facilities.
- **Publications**—corresponding or senior authorship for publications in the investigator's main area of research interest. This is desirable but not required.
- **Institutional support**—at least partially through hard-money, or money for start-up or equipment.

B. TIME IN INDEPENDENT CAREER

Use the Specifications chart to determine if there is a six-year limit on your eligibility. The following describes how this limit is determined. For clinician scientists, the same determinations apply *except* they are eligible for eight years from the time of their initial appointment, as long as they continue to provide patient care.

How the Start Date Is Determined. At the time of application, the applicant cannot have held an independent research position for more than six years. The ACS considers applicants to have achieved independent researcher status after six years of postdoctoral research training. Additional years of postdoctoral research training count toward the six-year limit on eligibility and the eight-year limit on eligibility for clinician scientists. Further, an applicant must have less than 12 years of research experience beyond their terminal degree.

Example 1: An applicant awarded a PhD in 2000, followed by eight years of postdoctoral training through 2008, must start their period of eligibility as an independent researcher after six years of postdoctoral training, i.e., in 2006. Thus, the period of eligibility to submit an RSG application would be from 2006 to 2012.

Example 2: An applicant awarded a PhD in 2000, followed by three years of postdoctoral training who then starts an independent research position in 2003 would be eligible to submit an RSG application from 2003 to 2009.

Example 3: An applicant awarded an MD in 2005 followed by six years of clinical specialty and subspecialty training who then starts an independent position in 2011 would be eligible to submit through 2019 provided they continue to see patients.

Note that independent investigators at any career stage, and with any level of prior funding, are eligible to propose population-based studies on health equity in the Cancer Control and Prevention Program, as shown on the chart.

Current Windows for Eligibility <i>determined by start dates</i>	
If Start Date as an Independent Researcher is On or After	Eligible to Apply for Grant Through
April 1, 2014	April 1, 2020
October 15, 2014	October 15, 2020
April 1, 2015	April 1, 2021
October 15, 2015	October 15, 2021
April 1, 2016	April 1, 2022
October 15, 2016	October 15, 2022
April 1, 2017	April 1, 2023

A career path or extenuating circumstances may merit an extension of eligibility. For instance, the following do not count against the applicant in the determination of the eligibility time frame:

- Exempt clinical training experience. Internships, residencies, and clinical fellowships are not considered to be research training and do not count toward the limit of 12 years of research experience beyond the terminal degree.

- Leave of absence. A documented leave of absence is not counted in the six years of eligibility. Leaves of absence may include military service (that does not include research training/experience); family leave;
- Other experience. Time spent working in a non-research position (e.g., clinical, teaching, administrative) is not counted toward eligibility. Note: work in any setting during which time the applicant gains research experience is not exempt.

C. CURRENT GRANT SUPPORT

Using the Specifications chart, determine if current funding is an eligibility criterion.

Applicants are ineligible for an RSG if, at the time of application, they have more than one research project award (R01 or R01-like) grant as principal investigator. R01-like is defined as an award that is more than three years and greater than \$100,000 per year in direct costs. Training awards, career development awards, and other awards solely or primarily for the support of the salary of the applicant (e.g., NIH K-awards) are excluded from this definition.

Although applicants may apply for multiple awards, a grantee may not be the principal investigator on more than one Research Scholar Grant at any time. Exceptions are made for recipients of grants who applied in response to RFAs and for PIs of Institutional Research Grants.

Applicants who are uncertain about their eligibility status may request a review but must do so no later than six weeks prior to the application submission deadline (by September 1 for the October 15 deadline; by February 15 for the April 1 deadline). A request for evaluation of eligibility should be sent to grant.eligibility@cancer.org. Attach 1) a letter explaining your rationale for requesting an exception to the eligibility rules and 2) a full curriculum vitae (not a biosketch).

If your request is approved, you will receive correspondence via email confirming your eligibility to apply; this letter should be included in the Appendix of your application. Questions may be directed to grant.eligibility@cancer.org.

3. TERM AND BUDGET

Most Research Scholar Grants are funded up to \$165,000 per year (direct costs), plus 20% allowable indirect costs, with a project period of four years.

Large multi-level cancer health equity studies may be awarded up to \$200,000 per year (direct costs), plus 20% indirect costs, with a project period of up to five years.

Research Scholar Grants on the Role of Health Policy and Health Insurance in Improving Access to Care and Performance of Cancer Prevention, Early Detection, and Treatment Services are funded up to \$165,000 per year (direct costs), plus 20% allowable indirect costs, with a project period of four years. Rapid cycle research studies (maximum project period of three years) or large multi-level cancer health equity studies may be funded up to \$200,000 per year (direct costs), plus 20% allowable indirect costs. See the [RFA description](#) on cancer.org.

Personnel may receive salary support up to the National Institutes of Health salary cap, prorated according to their percent effort on the project. Budgets submitted must be realistic estimates of the funds required for the proposed research.

4. EXPENDITURES

The Society is flexible in response to the changing needs of a research program. The principal investigator may make minor alterations (changes <\$15,000/year) within the approved budget except where such expenditures conflict with the policies of the Society.

Major changes in expenditures (>\$15,000 per year) require written approval from the Society. However, a purchase of permanent equipment has a \$5,000 per year threshold, beyond which written approval is required by the Society. Contact your Scientific Director for guidance.

5. CHANGE OF INSTITUTION

Recipients of a Research Scholar Grant may transfer their grant from one institution to another eligible institution only after receiving written approval from the Society. Grant recipients must request a transfer as soon as a final decision for changing institutions has been made. Contact the Program Office to alert the Scientific Director of your intent to transfer. Forms can be found under the Deliverables tab at <https://proposalcentral.com/>.

Prior to a transfer, the American Cancer Society must receive the following:

- A request for transfer in writing, indicating the anticipated transfer date;
- A statement from an administrative official at your original institution relinquishing the grant;
- A Report of Expenditures from the original institution, together with a check for any unexpended funds.
- Research Scholar Grant transfer forms (title page, contact information page, and the assurances and certification page of the Research Scholar Grant application form). These must be completed by the appropriate individuals at the new institution, indicating acceptance of the grant.
- Payments to the new institution will not be initiated until a final accounting and a check for any unexpended funds have been received from the original institution and the transfer has been approved by the Society. This final financial report must be submitted within 60 days of the date the transfer was requested.

INSTITUTIONAL RESEARCH GRANTS

1. DESCRIPTION OF INSTITUTIONAL RESEARCH GRANTS

An Institutional Research Grant (IRG) is a block award to an institution that enables it to give small grants to beginning investigators who do not have national peer-reviewed research grant support. The intent is to support these junior faculty in initiating cancer research projects so they can obtain preliminary results that will enable them to compete successfully for national research grants.

REQUIREMENTS FOR APPLICANTS FOR IRG PILOT PROJECT GRANTS (see below for additional information).

The purposes of the Institutional Research Grants program are to:

- support the development of new investigators to conduct independent cancer research;
- foster direct relationships between funded institutions and the local American Cancer Society; and
- support research by newly independent investigators in areas of special interest to the Society.

Any nonprofit, non-government institution that has 1) a significant number of established investigators conducting cancer research *and* 2) a replenishing pool of junior faculty interested in cancer research may apply to receive an Institutional Research Grant (IRG). Since an IRG is awarded to an institution as a whole, funds should be available to support cancer-related proposals from any health sciences school, college, or department within the institution.

Because the intent of the IRG is to support the efforts of institutions to foster the early career development of cancer researchers, funding preference will be given to institutions that document a program of mentoring activities intended to accomplish this objective. Through the IRG, the Society also intends to promote collaboration across cancer research disciplines and among institutions. Several institutions within a city, state, or other geographical region can form a consortium to apply for an IRG, and such applications are strongly encouraged. It is also possible for institutions that have IRGs to partner with other, usually smaller biomedical research institutions in their region to form such a consortium. This also ensures access to the program by institutions that do not have a sufficiently large pool of beginning investigators on their own.

APPLICATION REVIEW

New IRG applications are evaluated in terms of the potential impact on cancer research at an institution as judged by:

- a) the description of the proposed procedures for implementing and administering an IRG program;
- b) the size of the pool of applicants eligible for pilot project grants;
- c) the number of faculty members active in cancer-related research;
- d) the quality of the examples of research to be funded; and
- e) the institution's need for IRG funding.

The degree of interaction (current or proposed) between the institution and the local ACS is also a factor in the review.

Renewal applications are evaluated on the basis of the impact of the program, as evidenced by the productivity of the former grantees and overall research accomplishments such as publications, awards, and national competitive grants, especially those obtained as a result of preliminary investigation supported by the IRG during the immediate past grant period(s). The relevance to cancer of the research supported by individual allocations is also an important factor in the evaluation of renewal requests for continued support.

The application review also considers:

- a) evidence of interaction between the institution, including the pilot project grant recipients, and the local office of the American Cancer Society;
- b) the effectiveness with which the local IRG committee administers the program; and
- c) documented need of continued support.

Note: renewal applications must also include the critiques of the previous application and document progress made toward addressing the points made by the reviewers. Reviewers are instructed to evaluate the adequacy of the response to the prior reviews.

LOCAL INSTITUTIONAL RESEARCH GRANT REVIEW COMMITTEE

The American Cancer Society believes that the established faculty at the institution is in the best position to determine who should receive the pilot project awards. Accordingly, the institution (or group of institutions) must establish a local IRG Review Committee made up of representatives from the institution's schools and departments of medical, behavioral, biological, and physical sciences. The primary purpose of this committee should be to receive and review applications from eligible junior faculty for support from the American Cancer Society IRG. The use of the committee to allocate funds from other sources is not permitted.

The committee members, who should serve on a rotating basis, should include both senior and junior nationally funded faculty. The chair of the local IRG Committee, who will also serve as the principal investigator of the grant, should be, with rare exceptions, from the ranks of the senior faculty. The qualifications of the principal investigator to lead the IRG program include cancer research interests and accomplishments, mentoring experience, grant funding history, publication history, and administrative experience.

Neither the principal investigator nor any members of the local IRG Committee may receive funds from the IRG. To foster communication about the IRG Program with local Society volunteers and staff, institutions are expected to include one or two Region representatives as members of the local IRG Committee. (Please note: American Cancer Society staff may not vote on allocating funding to projects, because this would constitute a conflict of interest.) In addition, the principal investigator should assume responsibility for contacting the appropriate American Cancer Society Region staff to develop the plan for ACS-institution interaction if none exists.

The following procedure for application review is recommended:

- (1) At least one call for applications and one formal meeting of the local IRG Committee should occur each year, and more often for larger institutions or grants. There should be widespread promotion throughout the institution of the availability of funds for all qualified individuals (versus limiting such information to department heads).
- (2) Individual applicants submit written proposals for funding, preferably using the forms and biographical information sheets that the American Cancer Society provides with the application. The IRG Committee chair assigns each request to two or more committee members for review.

- (3) Committee members rank applications using an NIH or ACS-type priority score. Members from the same department as the applicant should leave the room while the application is being discussed and must abstain from voting. The local IRG Committee sets a “payline” according to the quality of the science and the amount of money available. Note: only applications with high priority scores should receive pilot-project grant funding. The chair is strongly encouraged to hold another review cycle and encourage applicants to revise and resubmit their proposals rather than fund non-competitive applications.
- (4) Following the meeting, the IRG Committee chair communicates the results of the review to all applicants, along with written evaluation of the projects. Awardees should be informed that publications resulting from research supported by the American Cancer Society **must** contain an acknowledgment, such as "Supported by Grant #IRG _____ from the American Cancer Society. (See Instructions, Summary Tables, for more information.)

REQUIREMENTS FOR APPLICANTS FOR IRG PILOT PROJECT GRANTS

IRG pilot project grants are intended to support independent, self-directed investigators early in their careers, for whom an institution must provide research facilities, resources, or space customary for an independent investigator. These individuals (usually assistant professors or equivalent) must be eligible to apply for independent national competitive research grants but may not currently hold such a grant. (At the discretion of the IRG principal investigator, an exception may be made for applicants with a non-cancer-related grant.) Applicants for pilot project grants should be within six years of their first independent research or faculty appointment. Support of senior investigators or postdoctoral fellows is not permitted.

Institutions may request a limited-time exception in order to allow faculty who are beyond the six-year eligibility limit but lack six years of research experience to apply for IRG pilot project grants. Typically, these institutions will be those in the process of developing their cancer research programs and the capacity of their faculty to conduct cancer research. Beyond this exception, these pilot project grant applicants must meet all other eligibility criteria as stated above.

Recipients of IRG pilot project grants are not required to be U.S. citizens. However, any applicant who is not a U.S. citizen must hold a visa that will allow him or her to remain in the U.S. long enough to complete the IRG pilot project. It is the responsibility of the institution to determine and document the visa status of any non-citizen recipient of IRG funds. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.

BASIS AND AMOUNT OF AWARD

The total amount of money awarded to an institution is based on the size of the applicant pool, defined as the number of beginning investigators (usually assistant professors or equivalent) who are eligible to apply for independent national competitive research grants, but who do not currently hold such a grant. For estimating the amount of funds to be requested, it may be assumed that approximately 30% of the individual applications received for review by the local IRG Committee will be funded. **Effective in 2020, the maximum number of subawards that may be requested is four per year or a total of 12 over a three-year grant term.**

The maximum IRG pilot project grant allocation is \$30,000 for one year, which the institution may prorate for grants of lesser duration. However, the ACS encourages awarding the entire grant amount. Institutions, at their own discretion, may also supplement individual awards from other institutional funds.

An individual may apply for a one-year competitive renewal of a previously funded pilot project grant. The local IRG review committee must require and review a progress report when considering the application for continuing funding.

SPECIAL INTEREST AWARDS:

Effective with the April 1, 2019 application deadline, the American Cancer Society is placing this component of the IRG program on hold. Until further notice, requests for Special Interest Award funds should not be included in the application. It is still expected, however, that the pilot project awards will be broadly distributed across all cancer-relevant topics).

An institution may include in its application a request for 1 additional pilot project grant per year to support research by junior faculty in areas of special interest to the Society. These include general cancer control (population sciences and psychosocial, behavioral, or health services research), or research related to cancer health equity, palliative care, or nutrition and physical activity and cancer. The request must be justified based on the institution's ongoing research in the area and must be justified based on the institution's suitability to support the program, ongoing research in the area, and the availability of a grant pool.

SUSPENDED

The merits of these special interest applications should receive separate consideration by the local IRG Committee. Depending on the number of proposals received by the institution, the principal investigator may decide to appoint a subcommittee to review them, with one member of the subcommittee reporting to the full local IRG Review Committee.

The American Cancer Society National Peer Review Committee on Institutional Research Grants will review a request for a special interest module separately from the other portion of the application, and funds awarded for the module may not be used for any other purpose.

Institutions that do not wish to apply for this special module may review applications from junior faculty in these areas in the overall competition for individual IRG allocations.

2. TERM OF THE AWARD

New grants are awarded to institutions for a three-year period and may be competitively renewed. Renewal awards may be from one to three years, depending on the merit of the application. The length of a funded renewal is determined by the National Peer Review Committee. The timetable for renewal applications appears on the chart below.

CALENDAR FOR SUBMISSION OF IRG RENEWAL APPLICATIONS			
Grant Start Date	Grant End Date	Renewal Application	New Grant Starts
January 2018	December 2020	April 2020	January 2021
January 2019	December 2021	April 2021	January 2022
January 2020	December 2022	April 2022	January 2023
January 2021	December 2023	April 2023	January 2024
January 2022	December 2024	April 2024	January 2025

If an institution is submitting an application to renew a grant whose funding has lapsed, an explanation for the lapse is required, along with as much documentation as possible of prior pilot project funding. If the grant was inactive for six or more years, it will be considered a new application.

Extension Without Additional Funds. An extension in time is only considered if an institution's renewal application is not successful. This extension may be for up to one year without additional funds, upon written request from the principal investigator. The request must be received 30 days before the expiration date of the grant. (See also Section 18.)

3. ALLOCATION AND EXPENDITURE OF FUNDS

Funds must be allocated by the local IRG Committee before the expiration date indicated in the award letter. Individuals have one year from the time of receipt of their pilot project grants to spend their allocations, **even if this extends past the end date of the entire IRG.** An institution can decide internally to extend the term of an individual pilot project grant so that funds remain available to complete the project.

Once the award is made to the individual grantee, the Society considers the funds expended. However, if any funds from an individual pilot project award remain unspent, they must be either 1) competitively reallocated by the institutional IRG Committee to another pilot project grant; or, if this is not possible, 2) returned to the ACS at the time of grant termination and submission of the Final Report of Expenditures.

Examples of a need to reallocate awarded funds could include:

- premature award termination due to departure of the funded investigator; or
- early termination of the project for scientific reasons or successful NIH funding.

An institution cannot have more than one IRG in effect at any one time. If the entire IRG award made to an institution is not allocated as subawards within the normal term of a grant, the unallocated funds cannot be carried forward to a renewal IRG. However, funds may be carried forward to subsequent years of the same IRG. Thus, the number of pilot projects awarded in each year of a grant is at the discretion of the local IRG Committee.

EXPENDITURES ALLOWED

- Research supplies and animal maintenance
- Technical assistance
- Domestic travel when necessary to carry out the proposed research program
- Publication costs, including reprints
- Costs of computer time
- Special fees (pathology, photography, etc.)
- Stipends for graduate students and postdoctoral assistants if their role is to promote and sustain the project presented by the junior faculty member
- Equipment costing less than \$2,000 (Special justification is necessary for items exceeding this amount.)
- Registration fees at scientific meetings

EXPENDITURES NOT ALLOWED

*The disallowed items below are in addition to those listed earlier in **INSTITUTIONAL EXPENDITURES**.*

- Salary of principal investigator (IRG Chair or pilot project grant recipient)
- Honoraria and travel expenses for visiting lecturers

4. INDIRECT COSTS

American Cancer Society grants are not designed to cover the total cost of an IRG program. The institution is expected to provide the required physical facilities and administrative services. In order to maximize the funds available to the junior investigators, indirect costs are not allowed for IRGs.

5. CHANGE OF PRINCIPAL INVESTIGATOR

The American Cancer Society must authorize any request for a change of principal investigator. Such a request must be submitted in writing and signed by an authorized official of the institution. Biographical information for the new principal investigator must be sent to the Scientific Director for IRGs before the request can be approved.

To access the necessary form for change in principal investigator, go to: <https://proposalcentral.com>; submission instructions are shown in the Appendix.

6. REQUIRED PROGRESS REPORTS

As soon as possible following the award of pilot projects in each year of the grant, but no later than December 31, the principal investigator must submit a report of the annual IRG project allocations. This report shall consist of the following:

- [The overall funding percentage for the year, i.e., awarded applications as a percent of total applications reviewed;](#)
- The name of each awardee with degree(s);
- The title of the project, its term, and the amount awarded; and
- A copy of the project abstract submitted initially with the IRG pilot project application.

This information will be added to the database record for your grant and provided to the local ACS office to facilitate understanding of the program and interaction with the recipients. *Submission of this information early in each grant year is strongly encouraged.*

To access the necessary form for annual progress reports, click <https://proposalcentral.com>; submission instructions are shown in the Appendix.

7. REQUIRED FINANCIAL REPORTS

For the Society's purposes, funds are considered expended once they have been allocated from the IRG to the individual investigator, who then has a full year in which to spend the monies allocated. Since many allocations are not made until late in the award year, the final report of expenditures is not due until 15 months after the expiration date stated in the award letter.

For example, if an IRG was in effect from January 1, 2018 to December 31, 2020, the report of expenditures will be due on March 31, 2022. See “Frequently Asked Questions” for additional information about the IRG terms and financial reporting.

To access the necessary form for a final report of expenditures, click [here](#); submission instructions are shown in the Appendix.

8. ANSWERS TO FREQUENTLY ASKED QUESTIONS

QUESTIONS ABOUT PILOT PROJECT GRANTS

- Q: I am a new assistant professor without any grant support from a national agency. Can I apply to the American Cancer Society National Office for an IRG?
- A: NO. Only your institution may apply. If there is an IRG in effect at your institution, you may apply to the local IRG Committee for support. If you don't know whether your institution holds an American Cancer Society IRG, contact the Society's Extramural Grants Department at 404-329-7558 or grants@cancer.org.
- Q: I am an assistant professor, and my initial nationally-peer-reviewed research grant was not renewed. Can I apply to my institution for an IRG?
- A: Yes. Individuals whose initial grant was not renewed and who are still at the level of assistant professor may apply for an individual IRG—provided they are within the first six years of their independent faculty appointment or equivalent, and they have not received funds from the IRG before.
- Q: I am an assistant professor with an RO1 award, but I want to initiate a project in a totally different area. May I apply for an individual IRG Award?
- A: No. The IRG is intended for new investigators without an active (i.e., NIH, NSF, ACS) national competitive research grant, no matter what the topic.
- Q: I am the recipient of a NIH K series grant; am I eligible to apply for IRG funding?

A: As long as the applicant meets all other criteria, holders of such awards are eligible to receive pilot project money from the IRG. However, recipients of K99/R00 grants who have progressed to the R00 grant are ineligible for an IRG because the unmentored phase of this extramural award supports an independent research project.

Q: I have a small grant from a local foundation. Am I eligible for an individual IRG award?

A: As long as the grant was not selected through a national peer-reviewed process and the aims do not scientifically overlap with those proposed in the IRG application, you may still apply for an IRG award.

Q: Is an individual eligible for more than one IRG pilot project grant?

A: An individual grantee may receive a second year of IRG funding for the same pilot project only. The award is contingent upon the local IRG Committee's review and approval of a progress report. An individual may NOT receive a second grant to initiate a different pilot project.

QUESTIONS ABOUT THE LOCAL IRG REVIEW COMMITTEE

Q: Who is on the local IRG Review Committee?

A: This Committee should be composed of representatives from all the health science schools and colleges of the institution. The chair of the Committee is the principal investigator of the IRG.

Q: How many people should serve on the local IRG Review Committee?

A: That depends on the number of applications to be reviewed and the expertise required. A broad representation from departments with investigators doing cancer research should be included.

Q: Should the Committee be composed only of senior researchers?

A: Preferably not, although the principal investigator of the IRG is usually a senior investigator. Junior researchers who are not eligible to receive pilot project grants from the IRG because they have funding from a national agency are also recommended. Ideally, former IRG recipients will also become Committee members.

Q: How long should a Committee member serve?

A: We suggest that committee members serve four- or five-year staggered terms, similar to our National Peer Review Committees.

Q: The instructions state that the local IRG Review Committee should include representatives from the local American Cancer Society. Why is this?

A: The Society wishes to increase awareness among our volunteers and staff about the importance of our research program. It is only because of the hard work of the volunteers in soliciting contributions that we are able to award money for research. When staff or volunteers serve on the local IRG Review Committee, they develop identification with both research and researchers and their understanding of and enthusiasm for research increases. This interaction is a very important criterion for judging the success of renewal applications.

Q: How do we identify these ACS representatives?

A: If you do not know your contact in the local American Cancer Society office, the IRG Scientific Director, Virginia Krawiec, can furnish the name of a contact.

Q: Can you give some other examples of successful ACS-institution interactions?

- A:
- 1) Hosting an event for the local ACS staff and volunteers where they can meet and hear presentations from the individual IRG awardees or other ACS grantees.
 - 2) Arranging visits of groups of ACS volunteers and staff to the institution to see the labs and investigators on an informal basis.
 - 3) Collaborating on advocacy efforts through the ACS Cancer Action Network.
 - 4) Collaborating on cancer control initiatives such as “80% in Every Community” and “Mission: HPV Cancer Free.” (ACS programs to increase rates of colorectal cancer screening and HPV vaccination, respectively).

On their part, local ACS staff can:

- 1) Invite individual grantees and/or the principal investigator of the IRG to present research updates or recognize grant recipients at local ACS events such as Relay for Life, major donor receptions, or Area Board meetings.
- 2) Participate in the local IRG Review Committee when asked to do so by the institution.
- 3) Engage ACS grantees in ACS CAN advocacy efforts or other ACS initiatives.

QUESTIONS ABOUT COMMITTEE OPERATIONS

Q: How does the pilot project grant review process occur?

A: The timing and operations of the review process are determined by the institution but should follow the guidelines in the IRG Policies.

Q: What is a good way to publicize the availability of funds?

A: Campus-wide publicity via e-mail or letters to all eligible junior faculty (not just to department chairs) is the best way. Notices on bulletin boards and in campus newsletters also work well. One institution put posters and a box of individual application forms at the entrances of all science buildings and received a record number of applications.

Q: What should we do if the recipient of a pilot project grant receives a national competitive grant on the same topic before any of the IRG award is spent?

A: If the Institutional Research Grant is still in effect, the unspent funds may be awarded to the next approved applicant from the institution; otherwise, the money must be returned to the Society.

QUESTIONS ABOUT THE FORMAT OF THE APPLICATION

Q: Why is so much documentation required?

A: The present forms were designed with advice from members of the National Peer Review Committee for Institutional Research Grants. The tables present the relevant information in a clear and consistent fashion, facilitating the evaluation process and enabling comparison of institutions with very diverse characteristics.

Q: How do we determine the number of junior investigators doing cancer research at our institution?

A: One way is to survey department chairs for the number of newly hired faculty and the number of recruitments planned for the next three years. Another approach is to request letters of intent from all prospective beginning investigators in the institution to assess their numbers and level of interest in applying for a pilot project grant.

Q: We have no idea what has happened to our awardees from previous years. What do we do?

A: The requirement for the institution to document its IRG track record has been in effect since 1989, so seven years of documentation should be available for inclusion in all renewal applications. The track record of awardees in obtaining grants and achieving publication is the most important criterion on which renewals are evaluated.

QUESTIONS ABOUT THE TERMS AND BUDGET

Q: Please explain the American Cancer Society policy on indirect costs for IRGs.

A: The Society wants as much money as possible to be used for the beginning investigators' projects. At the December 1993 meeting, the Board of Directors voted to eliminate indirect costs from the IRG awards, beginning with new and renewal grants initiated on or after July 1, 1994.

Q: How does an institution's business office handle IRG accounts?

A: The institution must set up a separate master account for the grant to the institution; most institutions then create subaccounts for each individual pilot project grant. The term of the pilot project grant is usually for one year following the notification date to the individual, not from the start date of the institution's IRG. The master account will be empty when all the pilot project grants have been made. Individuals with a pilot project grant have one year from the time of receipt of their award to spend their allocations, **even if this extends past the end date of the entire IRG.**

Q: What about awards made to other institutions as part of a consortium agreement?

A: These can usually be handled as subcontracts to the other institution.

Q: Our institution didn't award all of its pilot project grants until April, and the IRG grant year terminates December 31. Can the individual investigators spend their funds after December 31 without violating the Society's policy of not allowing carryover of unexpended funds from one grant period to the next?

A: Yes. Because of the special nature of the IRGs, the Society considers the funds to have been expended once they have been allocated to, but not necessarily spent by, an individual investigator. Therefore, it is important to award all of the pilot project grants by December 31 of the final year of the grant.

As an example, IRG-16-003-01 is in effect from January 1, 2016, through December 31, 2018. Individuals receiving pilot project grants in September 2018 will have until August 2019 to spend their money, and a final report of expenditures for grant IRG-16-003-01 will not be due until March 31, 2020.

- Q: May unspent funds be carried over from an existing IRG to a new grant?
A: No. If the institution has received a renewal, IRG-16-111-04, any money from IRG-13-003-01 not allocated as pilot project grants by December 31, 2018, must be returned to the Society and cannot be applied to allocations made after that date.

All allocations made from January 1, 2019, through the end of the grant, must come from the IRG-16-111-04 award. If the institution's renewal application is not successful, then and only then can an extension in time be granted, if so, requested by the institution.

- Q: One of our individual grantees received a pilot project grant in November, before the grant year ended that December 31. He has had a hard time getting started and has money left over after a year. Can we extend him for an additional year?
A: That is up to the local IRG Review Committee. Once the pilot project grant was awarded to the individual, the Society considers the funds expended. The committee can decide internally to extend the term of the individual's pilot project grant, or to return the leftover funds to the Society. Since the report of expenditures on an IRG ending December 31, 2018, will be due March 2020, it might be necessary for the principal investigator of the IRG in this example to request a delay in filing the report of expenditures.
- Q: One of our awardees from a previous IRG has left the institution and has money remaining in her account. Can we apply that money to one of the new pilot project grant applicants?
A: Only if the parent IRG is still in effect. Otherwise, that money must be returned to the Society.
- Q: I am an IRG pilot project grant recipient with a graduate student working in my lab. Can I use part of my \$30,000 allocation to pay this student's tuition or stipend?
A: A stipend is an allowable expense, but tuition is not.

QUESTIONS ON SPECIAL INTEREST AWARDS (*SUSPENDED*)

- Q: Why can't our institution request a Special Interest Award this year?
A: The American Cancer Society is reviewing this component of the IRG mechanism for its effectiveness. While this process occurs, the opportunity to request funding to award Special Interest Awards is suspended.
- Q: What is a Special Interest Award and how does the National Peer Review Committee decide who gets one?
A: A Special Interest Award is a \$30,000 pilot project grant targeted for a project in the area of overall cancer control, such as
- population science
 - behavioral research
 - one of the following specific areas of special interest to the Society:
 - cancer health equity
 - childhood cancer
 - palliative care
 - nutrition and physical activity and cancer.

Since applications in these areas may not compete well for limited funds, an institution may request up to \$30,000 to be allocated for a project in one of these areas in addition to the funds requested for other research projects.

If the National Peer Review Committee believes the institution has a good environment and sufficient applicants in the special interest area, it will recommend approval of the request. This portion of the award cannot be used for any other purpose. If no suitable applicant is found, the money must be returned to the Society and may not be used to support projects in other disciplines.

Q: Our institution was not recommended for a Special Interest Award. Does that mean we cannot accept applications in those areas?

A: You may review applications in those areas in competition with applications in all other areas.

Q: How does the local IRG Committee review the applications for a Special Interest Award?

A: Some institutions set up a separate subcommittee to review applications in the special interest area. The subcommittee is chaired by a voting member of the local IRG Committee, who presents the recommendations of the subcommittee to the full group.

MISCELLANEOUS QUESTIONS

Q: What are the most common reasons for the disapproval of an IRG application?

A: For new applications, the most common reasons for disapproval or failure to make the cutoff are:

- an apparent bias in the composition of the local IRG Committee and the procedure for the allocation of funds toward one school or department;
- failure to document an adequate pool size of junior investigators;
- insufficient ongoing cancer research at the institution.

For renewals, the most common reasons are:

- lack of productivity of past awardees;
- [inaccuracy of and](#) inconsistency between application tables;
- insufficient interaction with the Region of the American Cancer Society;
- ineligible principal investigators receiving pilot award funding (e.g. fellows or other non-independent investigators, senior investigators, investigators with national grants, etc.).

MISSION BOOST GRANTS

1. MISSION BOOST GRANT DESCRIPTION

The Extramural Research Program of the American Cancer Society has historically focused its investments on grant mechanisms that help launch the careers of investigators in cancer research. These investments have funded some of the brightest minds in cancer research. They've also broadly expanded knowledge about cancer biology in cells, animals, and humans, and about cancer health services and disparities, in addition to providing training for many healthcare

professionals. To extend our previous focus, we are pleased to announce our new investment initiative: Mission Boost Grants. We designed these grants to support select current and past ACS grantees specifically for the translation of their research to human testing.

Mission Boost Grants (MBG) are opportunities for ACS grantees to seek additional, or “boost,” resources for innovative, high-risk/high-reward projects. MBGs offer 2 stages of funding.

- **The Primary Boost** requires the investigator to develop outcome-specific, unequivocal milestones that reduce the risks of studying a new drug, device, or procedure in patients. The topic of study may be the same that was previously funded by the ACS grant, but it is not required to be. Primary MBG studies can be preclinical or clinical in nature.
- **The Secondary Boost** requires the investigator to have successfully completed the Primary Boost milestones and to have submitted them to the Extramural Council for permission to move forward with this grant. The investigator may apply for a Secondary Boost grant to receive support for an additional period for advancing the research to clinical testing in cancer patients. Secondary MBG studies must involve testing in cancer patients.

Focus of the Mission Boost Program

To be considered for an MBG, research projects must focus on studies in cancer patients, such as:

- Treatment – First Time in Humans (FTIH); clinical proof-of-concept (PoC); side effect reduction
- Diagnostics/Prognostics/Medical Devices – Clinical validation in humans
- Prevention – Including initial incidence or recurrence in humans (biomarker based/biomarker testing) and the identification and testing of interventions

Application and Review Process

The ACS anticipates awarding five to ten Mission Boost Grants in 2020.

Letter of Intent (LOI) Requirements: The letter of intent must include:

- A curriculum vitae of the principal investigator (PI) highlighting prior achievements under ACS support
- Brief description of the Primary (e.g. preclinical) Boost plans and key milestones
- Brief description of the Secondary (clinical) Boost plans.

How to Submit an LOI: Please follow the link to Altum/Proposal Central.

LOI Deadline: March 1, 2020

Notification Process: Selected PIs will receive an email inviting them to apply by April 15, 2020

Full Application Deadline: July 1, 2020 Those invited to submit will be provided with a full set of application policies and instructions.

Review Process: The Mission Boost Peer Review Committee will review proposals in August and the ACS Extramural Research Council will review proposals in September. Investigators selected for the Mission Boost Grants will be notified by email in early October 2020. The grants start January 1, 2021.

2. ELIGIBILITY RULES FOR MISSION BOOST GRANTS

Who's Eligible: Applicants must be either current or past ACS grantees who:

- Have held or currently hold one of these grants (or previous versions of such awards): Research Scholarship Grant (RSG), Mentored Research Scholar Grant (MRS), add Clinician Scientist Development Grant (CSDG), Cancer Control Career Development Awards (CCDA), or Pilot and Exploratory Projects in Palliative Care (PEP) award.
- Held one of the above ACS grants for a minimum of one year. **Note:** For current ACS grantees, we recommend delaying submission of letter of intent (LOI) until the last year of the grant since part of the LOI review includes consideration of discoveries and productivity under ACS support.
- Are currently independent, full-time faculty at a not-for-profit, US-based research institution that has facilities and support to enable preclinical and clinical studies.
- Although more than one LOI can be submitted for consideration, at no time can a PI hold more than a single MBG.

Who's Not Eligible: Individuals who have had grants for ACS Postdoctoral Fellows or IRG pilot awards without also having one of the grant types listed above. ACS Professors are not eligible to apply.

3. TERM AND BUDGET FOR A MISSION BOOST GRANT

Mission Boost Grants will be composed of two stages of funding:

Stage I will be for a term up to two years in duration with an allowable budget of \$100,000 per year direct costs plus 20% allowable indirect costs. Specific outcome-based milestones must be defined which are focused on enabling clinical testing during stage II. Following completion of stage I milestones, the Boost Grantee will be eligible to apply for stage II funding. The Extramural Grants Council will evaluate and determine whether the milestones have been met and consider transition to, and funding for, stage II.

Stage II will be for a term up to 18 months with an allowable budget up to \$300,000 direct costs plus 20% allowable indirect costs for clinical testing.

For both stage I and stage II studies, if requested, a maximum of six months will be allowed for no cost extensions.

We recognize that a total investment of \$600,000 over the two stages of the Mission Boost Grant may be inadequate to fully fund progress to cancer patient testing in many circumstances. It is our hope that MBG funding will be a catalyst to attract additional funding to more rapidly deliver benefits of research to cancer patients.

4. EXPENDITURES

Mission Boost Grants are intended to fit a variety of needs in scientific investigations related to cancer. A grant is generally made to cover the cost of such items as salaries and benefits for professional and technical personnel, special equipment, supplies, and other miscellaneous items required to conduct the proposed research. Personnel may receive salary support up to a maximum that equals the National Institutes of Health salary cap, prorated according to their percent effort on the project. Budgets submitted must be realistic estimates of the funds required for the proposed research.

It is the intent of the Society to be flexible in response to the changing needs of a research program. The principal investigator may make minor alterations within the approved budget except where such expenditures conflict with the policies of the Society. Major changes require written approval from the Society. A major budget change is one that is greater than \$15,000/year during the grant funding period. The \$15,000 threshold does not apply to the purchase of permanent equipment. The purchase of permanent equipment has a \$5,000/year threshold, beyond which written approval is required by the Society. Please contact your Scientific Director for guidance.

5. CHANGE OF INSTITUTION

Recipients of a Mission Boost Grants may transfer their grant from one institution to another eligible institution only after receiving written approval from the Society. Grant recipients must request a transfer as soon as a final decision for changing institutions has been made. Contact the Program Office to alert the Scientific Director of your intent to transfer. Forms can be found at <https://proposalcentral.com/>.

Prior to a transfer, the American Cancer Society must receive the following:

- A request for transfer in writing, indicating the anticipated transfer date;
- A statement from an administrative official at your original institution relinquishing the grant;
- A Report of Expenditures from the original institution, together with a check for any unexpended funds.
- Mission Boost Grant transfer forms (title page, contact information page, and the assurances and certification page of the Research Scholar Grant application form). These must be completed by the appropriate individuals at the new institution, indicating acceptance of the grant.
- Payments to the new institution will not be initiated until a final accounting and a check for any unexpended funds have been received from the original institution and the transfer has been approved by the Society. This final financial report must be submitted within 60 days of the date the transfer was requested.

MENTORED TRAINING AND CAREER DEVELOPMENT GRANTS

CLINICIAN SCIENTIST DEVELOPMENT GRANTS

1. DESCRIPTION OF CLINICIAN SCIENTIST DEVELOPMENT GRANTS

The Clinician Scientist Development Grant (CSDG) supports junior faculty members in becoming independent investigators as clinician scientists. Clinician scientists are investigators licensed to provide patient care and trained to conduct research. They pursue cancer research questions relevant to improving health.

This grant is designed for individuals, trained primarily as clinicians, who seek to maintain clinical practice and conduct research. The goals are to 1) strengthen their capacity to conduct cancer research and 2) increase their numbers. During the award term, individuals are expected to have an active role in clinical care and acquire the research training, mentoring, and experience necessary for transitioning into a successful career as an independent investigator.

In addition to the research project itself, the activities during the award period must be designed to develop the necessary knowledge and skills in relevant areas through mentoring and training such as course work, lectures, seminars, self-directed learning, or workshops.

Note: Doctoral-level applicants who are non-clinicians, and clinicians no longer involved in patient care, are **not eligible** to apply for the CSDG. If eligible, these researchers are encouraged to apply for the Research Scholar Grant or the Postdoctoral Fellowship.

2. ELIGIBILITY FOR CLINICIAN SCIENTIST DEVELOPMENT GRANTS

Individuals meeting the following criteria are eligible to apply without prior approval from the American Cancer Society. Applicants must:

1. Have a clinical doctoral degree (e.g., MD, DO, DDS, DNP, DSW, PharmD, PsyD, DVM etc.) with an active license to provide clinical care. Applicants may also hold dual degrees such as MD/PhD, RD/PhD, DVM/PhD, etc.
2. Be within the first six years of an initial full-time faculty position.
3. Provide justification to support the need for mentoring. Faculty with independent research programs and/or independent extramural research funding (an NIH R01 or equivalent) may not apply.
4. At the time of application, have no more than three years of mentored post-doctoral research training or experience. Applicants who have completed institutional career development awards (e.g., NIH K12) are eligible, but recipients of individual career development awards, such as an NIH K07, K08, or K23 grant, are not.

Career path or extenuating circumstances may allow for an extension of eligibility. For instance, the following do not count against the applicant in determination of the timeframe for eligibility:

- **Exempt Clinical Training.** Internships, residencies, and oncology subspecialty training (clinical fellowships) are not considered research training.
- **Leave of Absence.** An appropriately documented leave of absence is not counted in the years of eligibility. Leaves of absence may include military service (except research training/experience), medical, or family leave.
- **Other Experience.** Time spent working in a non-research position (e.g., clinical, teaching, administrative, or technical) is not counted toward eligibility. Work in industry in which the applicant gains research experience is not exempt.

General eligibility questions should be submitted via email to grant.eligibility@cancer.org. Applicants with extenuating circumstances or who remain uncertain about their eligibility status may request a formal evaluation of eligibility using the aforementioned email address. Communication about general questions should also be sent via email to the above address.

Making a formal evaluation of eligibility request:

- In the email subject line, insert “formal evaluation of eligibility,” and in the body of the email, briefly state the reason for your request. Include the following attachments: 1) a letter describing the rationale for an exception to the eligibility rules; and 2) a full curriculum vitae (not a biosketch).
- Request must be submitted at least 6 weeks before the application submission deadline (i.e. September 1 for the October 15 deadline; February 15 for the April 1 deadline).
- Following the review of your request by the Eligibility Committee, you will receive an email regarding the outcome of the review. If your request for an eligibility extension is approved, include this letter in the Appendix of your application.

3. TERMS OF AWARD OF THE CLINICIAN SCIENTIST DEVELOPMENT GRANT

Applicants may apply for a project period of three to five years, depending on the amount of mentored post-doctoral research training. The application deadline date determines the time frame and duration of eligibility for a CSDG. The following table shows eligibility for a MD or PhD clinician at the time of application.

Parameters for determining the CSDG project period (based on application deadline date)

Post-Doctoral, Mentored Research Training (years)	Max Project Period Allowed (years)
0 to < 2	5
2 to <3	4
3	3

A. Budget and Term of Award

Awards are made for up to five years and up to \$135,000 per year (direct costs), plus 8% allowable indirect costs.

- Applicants must obtain institutional commitment to dedicate at least 50% of their time to the proposed research and training plan.
- The budget for the grant period may include the applicant's salary, prorated according to the percent of effort devoted to the project, and additional funds for the research and training activities proposed.
- The budget may include salary and benefits for the mentor(s) up to \$10,000 per year — the maximum amount regardless of the number of mentors.
- Grant-funded salaries of the applicant and mentor(s) may not exceed the NIH cap. If the salary of either exceeds this cap, the institution may supplement the Society's contribution from other sources.
- Budgets must be realistic estimates of the funds required for the proposed research.
- If your application focuses on palliative care and/or symptom management, you may be invited to attend the annual Katherine M. Foley Palliative Care and Retreat and Research Symposium in certain years. To accommodate attendance, include approximately \$1,500 per year for the PI to travel to this meeting. For clarification contact the program manager, Chanda Felton (Chanda.Felton@cancer.org), prior to submitting your application.

B. Resubmission of Unfunded Applications

Applications that are not funded may be revised and resubmitted, subject to the following:

- Only two resubmissions are permitted.
- The same eligibility criteria apply as in a first submission.
- Resubmitted applications compete on an equal basis with all applications.
- Letters of recommendation may be reused if the application is resubmitted within a calendar year of the initial proposal. The recommenders must upload the letters to proposalCENTRAL again.

C. Renewals and Extensions of Awarded Grants

- CSDGs are not renewable.
- The CSDG termination date may be extended for up to one year, without additional funds, upon written request from the Principal Investigator. The Scientific Director must receive this request before the expiration date of the grant.

4. EVALUATION OF CLINICIAN SCIENTIST DEVELOPMENT GRANT APPLICATIONS

The committee will evaluate applications based on the following criteria:

1. **Applicant:** Academic and scientific qualifications, potential to succeed as an independent investigator, and commitment to research as a career.

Letters of reference will be evaluated to determine the applicant's research ability and potential, motivation, ability to plan and conduct research, knowledge of the field of study, and ability to work as a member of a research team.

2. **Mentor(s):** The appropriateness of the mentor(s)' research qualifications in the proposed project area, role on the project, and prior research productivity and success in fostering development of cancer researchers.
3. **Research Plan:** While there is significant competition for these mentored awards, the proposals are not expected to reflect the breadth and depth of the work of a senior scientist. The evaluation of the proposal includes assessment of its:
 - a. scientific and technical merit;
 - b. design, methodology, and feasibility;
 - c. relevance to the applicant's career objectives;
 - d. medical and health significance to cancer prevention, control, and/or treatment; and
 - e. appropriateness for developing necessary research skills.
4. **Training Plan:** Applications must include a comprehensive training plan. This could encompass courses, lectures, and/or workshops that enhance the applicant's research training and are relevant to the applicant's career objectives. The acquisition of relevant new or enhanced clinical skills may also be appropriate.
5. **Environment for Research and Training:** Documentation of institutional commitment to the applicant's research development must be included. This will be represented by the quality and relevance of the training environment and mentored relationship(s); the adequacy and availability of necessary space and facilities; and training opportunities for the proposed project.

5. CHANGE OF INSTITUTION/MENTOR(S)

Recipients of a CSDG may transfer their grant from one institution to another eligible institution or change their mentor(s) only after receiving written approval from the Society. Grant recipients must request a transfer as soon as a final decision for changing institutions has been made.

Contact the Program Office to alert the Scientific Director of your intent to transfer. Forms can be found under the Deliverables tab at <https://proposalcentral.com/>.

Prior to the formal transfer, the ACS must receive the following:

- A statement from an administrative official of note, at the original institution, relinquishing the grant.

- The final Report of Expenditures from the original institution, together with a check for any unexpended funds.
- CSDG transfer forms (title page, contact information page, and assurances and certification page) completed by the appropriate individuals at the new institution. These should indicate acceptance of the grant and document appropriate resources and mentorship.

Payments to the new institution will not be initiated until a final accounting and a check for any unexpended funds have been received from the original institution and the Society has approved the transfer. The final accounting must be submitted within 60 days of the transfer request.

The forms for transfer can be found at <https://proposalcentral.com>.

POSTDOCTORAL FELLOWSHIPS

1. DESCRIPTION OF POSTDOCTORAL FELLOWSHIPS

Postdoctoral Fellowships are designed to support individuals in programs of research training and study to enable new investigators to competitively qualify for independent careers in cancer research. Peer reviewers will consider whether the fellowship broadens the applicant’s research training and experience.

An application for a Postdoctoral Fellowship must be endorsed by the applicant’s proposed mentor and the head of the department in which the training will be conducted. A plan of training must be formulated and agreed on by the mentor and the applicant and described in detail in the application. Preliminary data included in the application must be carefully attributed to the person(s) responsible. There is an expectation that the fellow will commit 100% effort to this project. Clinical scientists must contact the appropriate Scientific Director prior to applying to discuss any changes to this policy. The stipend may be supplemented with non-grant funds, which allows 100% effort to be maintained. **Unfunded applications for Postdoctoral Fellowships may only be resubmitted once.**

2. TERM AND ELIGIBILITY RULES

***Please Note that the ACS no longer funds one-year Postdoctoral Fellowships. Resubmissions of one-year Fellowships will be grandfathered in and allowed.**

Postdoctoral Fellows must be, at the time of application, United States citizens, or permanent residents. Applicants must have obtained their doctoral degree prior to activation of the fellowship and may apply for two- or three-year fellowships. The Society uses the application deadline date to determine eligibility and the duration of fellowship awards.

The following table may be used to clarify eligibility:

At the time of application, if PhD or MD has been held:	American Cancer Society eligibility (based on application deadline date)
0 to < 2.0 years	3 years
2.0 to < 3.0 years	2 years

Individuals who have held a PhD or MD for more than three years at the time of application generally are not eligible for a fellowship. However, the following are not considered in the determination of eligibility:

- **Exempt Training**—Internships, residencies, and oncology subspecialty training are not considered research training, and do not count toward the 4-year limit beyond the terminal degree.
- **Leave of Absence**—An appropriately documented leave of absence will not be counted in the years of eligibility. Leaves of absence may include military service (that does not include research training/experience), family leave, and teaching in a non-research position.

Applicants who are uncertain about their eligibility status may request a review but must do so no later than six weeks prior to the application submission deadline (by September 1 for the October 15 deadline; by February 15 for the April 1 deadline).

A request for evaluation of eligibility should be sent to grant.eligibility@cancer.org. Please attach: (1) a letter that includes the rationale for requesting an exception to the American Cancer Society eligibility rules; and (2) a full curriculum vitae (not a biosketch). If your request is approved, you will receive correspondence via email confirming your eligibility to apply, which should be included in the Appendix. Additional questions may also be directed to grant.eligibility@cancer.org.

Revised applications may be submitted (one resubmission) if the applicant meets the eligibility requirements at the time of application. Revised applications will be reviewed in the same detail as the original submission and compete on an equal basis with new applications (see Postdoctoral Fellowship Instructions).

3. FUNDS

A Postdoctoral Fellowship consists of a stipend and fellowship allowance. Institutional indirect costs may **not** be recovered from these funds.

Stipend: Awards cover \$52,000, \$54,000, and \$56,000 for the first, second, and third years respectively. Fellows eligible for only two years may request progressive stipends of \$54,000 and \$56,000, respectively. **One-year fellowships are no longer offered but resubmissions of one-year fellowships are grandfathered in and a request of \$56,000 is allowed.** The annual stipend must be used solely for the salary support of the fellow. The institution may supplement the stipend with non-grant funds, as long as 100% research effort on the Society Fellowship is maintained. An awardee may not hold a Postdoctoral Fellowship Award from another funding source (federal or non-federal) at the same time as the American Cancer Society Award. The Society does not withhold any amount for income tax purposes. The applicant should contact the Internal Revenue Service to determine the tax status of the fellowship.

Fellowship Allowance: Each fellow will receive \$4,000 per year during the fellowship plus \$1,500 in the last year. This allowance may be used to help defray costs incurred at the fellow's training institution for the benefit of the fellow. Examples of such costs are health insurance,

travel to scientific meetings (travel outside North America is not included), etc. The additional \$1,500 in the last year is to be prioritized for travel costs to attend the American Cancer Society Jiler Professors and Fellows Conference, if offered that year, or travel to another domestic scientific meeting.

Paid Maternity/Paternity Leave: With prior notification of the ACS, new parents may take paid maternity/paternity leave of up to 12 weeks. This leave will not extend the duration of the Postdoctoral Fellowship. Documentation of agreement of the Mentor and Institution are required.

4. CHANGE OF INSTITUTION/MENTOR

The grantee is required to discuss any proposed change in institution and/or mentor with the Scientific Director prior to the proposed change.

Change of institution: Recipients of a Postdoctoral Fellowship may transfer their grant from one institution to another only after receiving written approval from the Society. Prior to transfer, upload the following to proposalCENTRAL (<https://proposalcentral.com/>):

- A request for transfer in writing, indicating the anticipated transfer date. If the mentor and/or project will also change, please refer to the Change of Mentor section below.
- A statement from an administrative official at the original institution relinquishing the grant.
- A Postdoctoral Fellowship transfer form, completed by the appropriate individuals at the new institution, indicating acceptance of the grant.
- The final Report of Expenditures from the original institution, together with a check for any unexpended funds. Payments to the new institution will not be initiated until a final accounting and a check for any unexpended funds have been received from the original institution and the transfer has been approved by the Society. This final financial report must be submitted within 60 days of the date the transfer was requested.

Change of mentor: A change of mentor for the recipients of Postdoctoral Fellowships is not routinely allowed but will be considered on a case-by-case basis. If a change in mentor also involves a change in project and/or institution, a new application may be requested. Contact the appropriate Scientific Director for further information.

PHYSICIAN TRAINING AWARDS IN CANCER PREVENTION

1. PURPOSE OF PHYSICIAN TRAINING AWARDS IN CANCER PREVENTION

The Physician Training Award in Cancer Prevention (PTACP) is intended to encourage and assist the development of promising individuals who are pursuing careers in preventive medicine, [including occupational medicine](#).

This program is designed to create a cadre of preventive medicine specialists who are expert in cancer prevention and control, with the potential to become leaders in research, education, and intervention in this area. Through the Physician Training Award in Cancer

Prevention, the Society seeks to support physicians in accredited residency programs that will lead to eligibility for certification in preventive medicine; such programs must provide research and practice opportunities in cancer prevention and control.

2. REQUIREMENTS FOR INSTITUTIONS

The sponsoring institution must commit support for the clinical, research, and teaching activities (where appropriate) of the candidate. This commitment may include facilities, resources, equipment, training programs or seminars, an organized cancer program that will support the cancer prevention and control aspects of the candidate's program, and/or a relationship with another institution or cancer center.

Institutions that have a strong cancer prevention and control program as well as an accredited preventive medicine residency program will be the most competitive. Recently accredited programs will be reviewed more favorably once residents have graduated from the program.

A two-year institutional training program must be presented in the application, detailing the activities proposed to support the completion of the residency requirements in preventive medicine and with an emphasis in cancer prevention and control. Thus, the didactics, clinical training, research, public health, and other population-based experiences of the residency must include appropriate cancer prevention and control content. The inclusion of teaching is also appropriate.

Programs that can document the following characteristics will be the most competitive:

- Identifiable curriculum in cancer control
- Cancer prevention track
- Institutional support (e.g., tuition reduction for sponsored residents)
- Memoranda of understanding supportive of underserved populations
- Memoranda of understanding with other entities engaged in cancer prevention and research
- External support (e.g., state health department, local foundation)

The following requirements must be met when submitting an application:

- A. The training program must meet the requirements of the ACGME Residency Review Committee for residency programs that offer academic and practicum phases leading to board eligibility for preventive medicine, [including occupational medicine](#). Applications from one-year programs will be accepted but must propose a two-year curriculum.
- B. Funded programs must document accreditation throughout the entire award period, providing updated letters and accreditations as necessary. *Note: if a program loses or changes its accreditation status during the period of the grant, the funding will be put on hold until accreditation is restored. A grant may not be put on hold for longer than two years.*
- C. The institution must provide documentation of a supervised well-defined program in preventive medicine with an emphasis on cancer prevention and control. A description

of the activities planned to support development of clinical, research, and teaching skills must be included.

- D. The application must describe the roles of the principal investigator and any other key faculty in the proposed cancer prevention and control training program. Documentation of their credentials, expertise, and commitment must be included.
- E. The application must describe a plan for interaction between the funded residents and the local office of the American Cancer Society. A letter of support from the American Cancer Society must be submitted with the application.
- F. The institution must describe how these funds, if awarded, will be used to support the residents' completion of the preventive medicine residency requirements as well as the acquisition of expertise in cancer prevention and control. [Peer reviewers will assess impact as demonstrated by measurable results and new deliverables.](#)
- G. To broaden the impact of the grant program beyond the programs that receive grants, funded programs must agree to work collaboratively to develop a curriculum to support cancer prevention and control training

3. REQUIREMENTS FOR RESIDENTS

Candidates nominated for support via the PTACP must state their commitment to a career in preventive medicine with an emphasis on cancer prevention and control. During the two-year period of the award, residents are required to complete the residency requirements in preventive medicine and become board eligible. All awardees are expected to pass the boards in preventive medicine and become involved as local American Cancer Society volunteers.

The following eligibility requirements must be met:

- A. Nominated residents are not required to be U.S. citizens. It is the responsibility of the institution to determine and certify that the visa status of any resident who is not a U.S. citizen will allow them to remain in this country for the duration of the ACS-funded training. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.
- B. The candidate must have an MD, DO, or equivalent degree.
- C. The candidate must have completed the clinical year of a residency program in preventive medicine or have at least one year of postgraduate clinical training.
- D. The candidate must be accepted by or in the process of applying to the sponsoring residency program.
- E. It is preferred that the candidates not have completed more than half of the required academic work at the beginning of the award period. Residents that have completed the MPH degree will be considered on a case-by-case basis and must propose course work in cancer prevention and control.

4. TERM AND FUNDING

Effective in 2021, grants begin each July 1 of the year following the application deadline. The funding for the PTACP shall be a maximum of \$300,000 over the funding period of four years, renewable after two years to maintain continuity. Thus, grants approved during the spring 2020 review cycle will begin July 1, 2021, and end June 30, 2025. Please note: if a grant is renewed, there is a **six-month** overlap with the previous grant. The application budget is to be based on one resident in years one and four and two residents in years two and three. Up to \$50,000 per resident per year may be allocated. The timetable for submitting the initial proposal, resident nominations, and renewal applications appears on the chart below.

Note: if a program is unable to nominate a resident, the grant will be put on hold until a resident(s) is approved. In general, the hold will be in place for one year beginning July of the year in which no resident was nominated for PTACP support. A grant may not be put on hold for longer than two years.

The award funding may be used for resident tuition and stipend and faculty and administrative support for the training program. However, it is expected that most (75% or more) of the funds will be used to support the residents. No portion of the award may be used to pay indirect costs.

There is no objection to reasonable stipend supplementation from institutional funds and research or training grants (other than those of the American Cancer Society). Such supplementation must not entail duties that will interfere with or detract from the program and must be reported to the Society.

CALENDAR FOR SUBMISSION OF PTACP RENEWAL APPLICATIONS			
Grant Start Date	Grant End Date	Renewal application	New Grant Starts
January 2018	June 2022	April 2020	July 2021
January 2019	June 2023	April 2021	July 2022
January 2020	June 2024	April 2022	July 2023
July 2021	June 2025	April 2023	July 2024
July 2022	June 2026	April 2024	July 2025

DATE	ACTIVITY
April 2020	Application due date
October 2020	Award notice
July 2021	Start of funding (grant ends June 2025)
July 2021	Begin date for first resident

July 2022	Begin date for second resident (begin year two for first resident)
April 2023	Renewal application due date
July 2023	Begin date for third resident (begin year two for second resident)
October 2023	Renewal award notice
July 2024	If successful, start of funding of renewal grant (one-year overlap with prior grant)
July 2024	Begin date for first resident, 2024 grant (begin year two for third resident, 2021 grant)
June 2025	End date of grant that began July 2021
July 2025	Begin date for second resident
April 2026	Renewal application due date
July 2026	Begin date for third resident

5. CHANGE OF PRINCIPAL INVESTIGATOR OR INSTITUTION

Transfer of the grant from one institution to another is not permitted.

During the period from the receipt of an application through the end of an award, a change of Principal Investigator requires authorization from the Society. Prior to a change, a request for the change must be submitted in writing and signed by an authorized official of the institution. To access the necessary form for change in principal investigator, go to <https://proposalcentral.altum.com>; submission instructions are in the appendix to the Policies.

In order to authorize the change, the American Cancer Society must receive the following:

- The request for change in writing, indicating the anticipated change date; and
- A biographical sketch form for the proposed principal investigator.

6. REQUIRED PROGRESS REPORTS

Physician Training Awards in Cancer Prevention are awarded with the requirement that the residents will provide summary reports to the American Cancer Society at the completion of their training. Notice of the due date and instructions for submitting these reports will be forwarded to each resident and program director. The form for annual progress reports is available at <https://proposalcentral.altum.com>; submission instructions are in the appendix to the General Policies.) The timely receipt of progress reports may be a factor in continuing funding.

RESEARCH AND CLINICAL RESEARCH PROFESSOR AWARDS

1. DESCRIPTION OF THE RESEARCH PROFESSOR AND CLINICAL RESEARCH PROFESSOR AWARDS

The American Cancer Society offers Research Professor and Clinical Research Professor awards to provide unique research opportunities, which foster creativity and innovation in cancer research. Research Professor awards provide flexible funding for outstanding investigators who have been a full professor for 15 years or less and have made seminal contributions that have changed the direction of cancer research.

Clinical Research Professor awards provide flexible funding for outstanding investigators who have been a full professor for 15 years or less and have made seminal contributions in areas of cancer control that have changed the direction of clinical, psychosocial, behavioral, health policy or epidemiologic cancer research. American Cancer Society Clinical Research Professor awards may also be used to support individuals who are dedicated to bringing advances in basic sciences into the clinical arena and to articulating clinical problems for basic research scientists.

American Cancer Society Research and Clinical Research Professors are expected to be spokespeople for the American Cancer Society and for cancer research in general. Up to two five-year awards may be made annually and each award may be renewed once. The award of up to \$80,000 per year can be budgeted at the recipient's discretion for creative pursuits in cancer research. See Section 6 below for special conditions of the award.

2. TERM

Research Professor and Clinical Research Professor awards are made for an initial five-year period. The Society will support up to 25 active Research Professors and up to 15 active Clinical Research Professors. Up to two new awards may be made in each category per year. Professor awards may be renewed for a single five-year term, contingent upon peer review of activities and progress made during the initial award period.

The application of renewal will not compete with candidates applying for a new award. While funding will not continue beyond the end of the 10-year period, the title of American Cancer Society Professor can be used throughout the scientist's career. Awardees who resign during the tenure of the award are encouraged to continue using the title. If the awardee no longer holds an appropriate position, retires, or is deceased, the grant terminates.

Typically, applications for American Cancer Professor Awards may be submitted once every three years.

3. APPLICATION PROCESS FOR NEW AWARDS

Interested individuals must electronically submit a 2 -3 page Letter of Intent and *curriculum vitae* with a complete bibliography to Dr. William Phelps, Senior Vice President, Extramural Research, via the American Cancer Society electronic submission website at <https://proposalcentral.altum.com>. The Letter of Intent for the Research Professor Award must be

submitted between December 1 and February 1. The Letter of Intent for the Clinical Research Professor Award must be submitted between June 1 and August 1. The Letter of Intent should briefly describe the candidate's seminal contributions to cancer research, their leadership roles in the cancer research community, and their track record of mentoring individuals who have become successful in cancer research. The candidate will be notified by email if the Letter of Intent has been accepted or not. Acceptance provides the candidate with immediate access to the application forms on proposalCENTRAL. Research Professor candidates whose Letter of Intent has been approved must submit their application for the award for the April 1 deadline, and Clinical Research Professor candidates whose Letter of Intent has been approved must submit their application for the award for the October 15 deadline.

New applications are reviewed by the appropriate peer review committee and the Council for Extramural Grants. A site visit may be required as part of the review process.

For further information, contact:

William Phelps, PhD
Senior Vice President, Extramural Research
American Cancer Society
Extramural Research Department
250 Williams Street, NW
Atlanta, GA 30303-1002
kim.a.smith@cancer.org

4. APPLICATION PROCESS FOR RENEWALS

Research Professors and Clinical Research Professors have gone through a rigorous peer review process that identified *them* as an *individual* who has made seminal discoveries in their field and is recognized as a thought leader and successful mentor whose contributions are projected to continue. The purpose of the renewal is to ensure that the recipient continues to be a highly productive investigator who is continuing to make seminal contributions through research and mentoring and has not become overly burdened with administrative responsibilities. The renewal is also designed to determine if the ACS Professor has served as a spokesperson for the Society through participation in Society-sponsored events and through using the American Cancer Society Professor title on publications and during speaking engagements.

At the start of the renewal process, proposalCENTRAL (<https://proposalcentral.com>) will request a Letter of Intent (LOI). Since this is a renewal, you do NOT have to submit a formal LOI. Enter the title of your renewal in the online LOI and submit it. You will then receive an email confirming access to the application forms on proposalCENTRAL. Renewals are reviewed solely by the Council for Extramural Grants.

The renewal application must be submitted through the American Cancer Society electronic application website at <https://proposalcentral.com>. Renewals must be submitted between January 1 and April 1 of the final year of the Research Professor Award, and between July 1 and October 15 of the final year of the Clinical Research Professor Award. A reminder will be

sent by Dr. William Phelps, Senior Vice President, Extramural Research, prior to the respective deadline.

5. FUNDS

The Research Professor and Clinical Research Professor awards provide funding for a five-year term of up to \$80,000 per year (**direct costs only; no indirect costs allowed**).

6. EXPECTED CONDITIONS FOR RESEARCH PROFESSOR AND CLINICAL RESEARCH PROFESSOR AWARDS

- A. The position will carry all rights and privileges normally provided at the institution.
- B. In accordance with normal practices of the institution, the awardee may look forward to promotions and to appropriate salary increases.
- C. The awardee will be provided with physical facilities and administrative services to conduct research and/or have access to clinical facilities.
- D. The awardee will be expected to periodically speak on behalf of the American Cancer Society and to use the title as appropriate in professional appearances and publications. Speaking appearances will be arranged to be mutually convenient to the awardee and the Society.

7. REQUIRED REPORTS

Final Report: Both a non-technical and a technical report must be submitted within six weeks of the termination date of the award. The final progress report is provided at <https://proposalcentral.com>. **The final report should cover the entire grant period.** In the event the award has been extended without additional funds, the final report is not due until the new termination date of the grant. If the award is terminated early, a final report must be submitted within six weeks of the early termination date.

If you have any questions, please contact Dr. William Phelps, Senior Vice President, Extramural Research at kim.a.smith@cancer.org.

8. CHANGE OF INSTITUTION

Recipients of a Research or Clinical Research Professor Award may transfer their grant from one institution to another eligible institution only after receiving written approval from the Society. Grant recipients must request a transfer as soon as a final decision for changing institutions has been made. The review of the transfer request may require a site visit. **Contact the Program Office to alert the Scientific Director of your intent to transfer.** Forms can be found under the Deliverables tab at <https://proposalcentral.com/>.

Prior to a transfer, the American Cancer Society must receive the following:

1. The request for transfer in writing, indicating the anticipated transfer date.
2. A statement from an administrative official at the original institution relinquishing the grant;
3. The Report of Expenditures from the original institution together with a check for any unexpended funds;
4. Research/Clinical Research Professor Award transfer forms (title page, contact information page, and assurances and certification page of the Research Professor Award application form) completed by the appropriate individuals at the new institution, indicating acceptance of the grant.
5. Payments to the new institution will not be initiated until a final accounting and a check for any unexpended funds have been received from the original institution and the transfer has been approved by the Society. This final financial report must be submitted within 60 days of the date the transfer was requested.

REQUESTS FOR APPLICATIONS (RFAS)

PILOT AND EXPLORATORY RESEARCH PROJECTS IN PALLIATIVE CARE OF CANCER PATIENTS AND THEIR FAMILIES

1. DESCRIPTION OF PILOT AND EXPLORATORY PROJECTS

The Pilot and Exploratory Project mechanism supports a small pilot or exploratory project to test interventions, develop research methodologies, and explore novel areas as defined here:

Palliative care specializes in the relief of pain and other symptoms of cancer and its treatment. Palliative care research focuses on the prevention and relief of suffering by the early identification, assessment, and treatment of pain, as well as of other physical, psychosocial, and spiritual problems associated with cancer.

Reducing suffering and improving the quality of care and quality of life for patients, family members, and caregivers are major goals of this area of care. Research may focus on 1 or more of these:

- decision making
- treatment
- symptom control
- team care
- engaging family members and caregivers to address communication barriers and/or optimal symptom management.

The Society partnered closely with the National Palliative Care Research Center (NPCRC) to formulate this mechanism, and the NPCRC continues to be a valuable partner. (<http://www.npcrc.org/>)

Recommended Palliative Care Resources:

- “From Cancer Patient to Cancer Survivor: Lost in Translation,” Institute of Medicine.
- American Academy of Pain Management, Index of Resources.
- [National Cancer Survivorship Resource Center](#)
- [National Hospice and Palliative Care Organization, Index of Resources](#)

2. ELIGIBILITY FOR PILOT AND EXPLORATORY PROJECTS

- Applications may be submitted by not-for-profit institutions located within the United States and its territories.
- Applicants must hold a doctorate degree (MD, PhD, or equivalent) and a full-time faculty position or equivalent at a college, university, medical school, or other fiscally responsible not-for-profit organization within the United States.
- Independent investigators at **all** stages of their career are eligible to apply. Thus, the usual ACS restriction to investigators within the first six years of their initial independent research appointment does **not** apply to this RFA.

3. TERMS OF AWARD OF PILOT AND EXPLORATORY PROJECTS

A. Budget and Term of Award

- Awards may not exceed a period of two years duration with a maximum budget of \$60,000 per year plus 20% indirect costs. Salary support for the Principal Investigator may not exceed 20% of the funded project’s direct costs.

B. Resubmission of Unfunded Applications

- Applications that are not funded may be revised and resubmitted two additional times (i.e., a total of three times).
- Applications for this RFA may be submitted only during cycles when the RFA is active, i.e., when it is posted online.

C. Renewals and Extensions of Awarded Grants

- These grants are not renewable.
- The termination date of any grant may be extended for up to one year without additional funds upon written request from the Principal Investigator. The Scientific Director must receive this request 30 days before the expiration date of the grant.

1. EVALUATION OF APPLICATIONS

The committees will evaluate applications on all of the following criteria:

- **Significance**

Does the project address an important problem or a critical barrier to progress in the field? If the aims of the project are achieved, how will they:

- improve scientific knowledge, technical capability, and/or clinical practice?
- change the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field?
- impact cancer health equity, cancer disparities, social change, and/or policy?

- **Cancer Relevance**

How is this research relevant to persons at risk for or living with cancer, and their family members, caregivers, friends, and community?

- **Innovation**

Does the application challenge and seek to shift current research or clinical practice paradigms by utilizing or refining novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Are these innovations novel to one field of research, or novel in a broad sense?

- **Investigators**

Are the PI and members of the proposed study team appropriate to carry out the proposed research? For example, does the team have:

- the training and experience needed to carry it out,
- the complementary skills and qualifications to implement and analyze it, and/or
- previous experience collaborating on research or publications?

- **Approach**

Are the overall strategy, methodology, and analyses well-reasoned and appropriate to the aims of the project? How will the specific aims advance scientific knowledge of palliative care in one or more of the following areas for patients, their families, and /or caregivers:

- *Quality of Life*. Reducing and managing pain or other distressing symptoms, improving physical functioning, or providing emotional or spiritual support
- *Effective communication*. Enabling informed and shared decision-making with cancer survivors, their families, and the health care team.
- *Quality of care*. Testing novel models of delivering high-quality palliative care or system-level intervention to improve access to care, care coordination, or outcomes for cancer patients and their families.

Are potential problems, alternative strategies, and benchmarks for success presented with relevance to the community? If the project is in the early stages of development, will the strategy establish feasibility and manage particularly risky aspects? Are plans for data collection and analysis well-reasoned? Is the sample size sufficient for sub-analysis of the targeted populations(s)? If this is a program project, are evaluation plans and logic model included? Are study timelines feasible to carry out the scope of work and support a meaningful and logical extension of the proposal?

- **Environment**

Will the project's scientific environment contribute to its probable success? Are the institutional support, equipment, and other physical resources available to the investigators adequate for the project proposed? Will the project benefit from any unique features of the scientific environment, subject populations, or collaborative arrangements?

- **Potential for Future Funding of Project**

An integral part of this grant is a clearly defined plan for using the data and/or process information it generates to develop larger, extramurally funded research. Is there such a plan?

RESEARCH SCHOLAR GRANT IN THE ROLE OF HEALTH POLICY AND HEALTHCARE INSURANCE IN IMPROVING ACCESS TO AND PERFORMANCE OF CANCER PREVENTION, EARLY DETECTION, AND TREATMENT SERVICES

More details can be found here: <https://www.cancer.org/research/we-fund-cancer-research/apply-research-grant/grant-types/rfa-role-healthcare-insurance-cancer.html>. This RFA will use the Research Scholar Grant mechanism (see page 26).

PREDOCTORAL TRAINING

PHYSICIAN TRAINING AWARDS IN CANCER PREVENTION

1. DESCRIPTION OF PHYSICIAN TRAINING AWARDS IN CANCER PREVENTION

The Physician Training Award in Cancer Prevention (PTACP) is intended to encourage and assist the development of promising individuals who are pursuing careers in preventive medicine, [including occupational medicine](#).

This program is designed to create a cadre of preventive medicine specialists who are expert in cancer prevention and control, with the potential to become leaders in research, education, and intervention in this area. Through the Physician Training Award in Cancer Prevention, the Society seeks to support physicians in accredited residency programs that will lead to eligibility for certification in preventive medicine; such programs must provide research and practice opportunities in cancer prevention and control.

2. REQUIREMENTS FOR INSTITUTIONS

The sponsoring institution must commit support for the clinical, research, and teaching activities (where appropriate) of the candidate. This commitment may include facilities, resources, equipment, training programs or seminars, an organized cancer program that will support the cancer prevention and control aspects of the candidate's program, and/or a relationship with another institution or cancer center.

Institutions that have a strong cancer prevention and control program as well as an accredited preventive medicine residency program will be the most competitive. Recently accredited programs will be reviewed more favorably once residents have graduated from the program.

A two-year institutional training program must be presented in the application, detailing the activities proposed to support the completion of the residency requirements in preventive medicine and with an emphasis in cancer prevention and control. Thus, the didactics, clinical training, research, public health, and other population-based experiences of the residency must include appropriate cancer prevention and control content. The inclusion of teaching is also appropriate.

Programs that can document the following characteristics will be the most competitive:

- Identifiable curriculum in cancer control
- Cancer prevention track
- Institutional support (e.g., tuition reduction for sponsored residents)
- Memoranda of understanding supportive of underserved populations
- Memoranda of understanding with other entities engaged in cancer prevention and research
- External support (e.g., state health department, local foundation)

The following requirements must be met when submitting an application:

- A. The training program must meet the requirements of the ACGME Residency Review Committee for residency programs that offer academic and practicum phases leading to board eligibility for preventive medicine, [including occupational medicine](#). Applications from one-year programs will be accepted but must propose a two-year curriculum.
- B. Funded programs must document accreditation throughout the entire award period, providing updated letters and accreditations as necessary. *Note: if a program loses or changes its accreditation status during the period of the grant, the funding will be put on hold until accreditation is restored. A grant may not be put on hold for longer than two years.*
- C. The institution must provide documentation of a supervised well-defined program in preventive medicine with an emphasis on cancer prevention and control. A description of the activities planned to support development of clinical, research, and teaching skills must be included.
- D. The application must describe the roles of the principal investigator and any other key faculty in the proposed cancer prevention and control training program. Documentation of their credentials, expertise, and commitment must be included.
- E. The application must describe a plan for interaction between the funded residents and the local office of the American Cancer Society. A letter of support from the American Cancer Society must be submitted with the application.
- F. The institution must describe how these funds, if awarded, will be used to support the residents' completion of the preventive medicine residency requirements as well as the acquisition of expertise in cancer prevention and control. [Peer reviewers will assess impact as demonstrated by measurable results and new deliverables.](#)

- G. To broaden the impact of the grant program beyond the programs that receive grants, funded programs must agree to work collaboratively to develop a curriculum to support cancer prevention and control training

3. REQUIREMENTS FOR RESIDENTS

Candidates nominated for support via the PTACP must state their commitment to a career in preventive medicine with an emphasis on cancer prevention and control. During the two-year period of the award, residents are required to complete the residency requirements in preventive medicine and become board eligible. All awardees are expected to pass the boards in preventive medicine and become involved as local American Cancer Society volunteers.

The following eligibility requirements must be met:

- A. Nominated residents are not required to be U.S. citizens. It is the responsibility of the institution to determine and certify that the visa status of any resident who is not a U.S. citizen will allow them to remain in this country for the duration of the ACS-funded training. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.
- B. The candidate must have an MD, DO, or equivalent degree.
- C. The candidate must have completed the clinical year of a residency program in preventive medicine or have at least one year of postgraduate clinical training.
- D. The candidate must be accepted by or in the process of applying to the sponsoring residency program.
- E. It is preferred that the candidates not have completed more than half of the required academic work at the beginning of the award period. Residents that have completed the MPH degree will be considered on a case-by-case basis and must propose course work in cancer prevention and control.

4. TERM AND FUNDING

Grants begin each July 1 of the year following the application deadline. The funding for the PTACP shall be a maximum of \$300,000 over the funding period of four years, renewable after two years to maintain continuity. Thus, grants approved during the spring 2020 review cycle will begin July 1, 2021, and end June 30, 2025. Please note: if a grant is renewed, there is a one-year overlap with the previous grant. The application budget is to be based on one resident in years one and four and two residents in years two and three. Up to \$50,000 per resident per year may be allocated. The timetable for submitting the initial proposal, resident nominations, and renewal applications appears on the chart below.

Note: if a program is unable to nominate a resident, the grant will be put on hold until a resident(s) is approved. In general, the hold will be in place for one year beginning July of

the year in which no resident was nominated for PTACP support. A grant may not be put on hold for longer than two years.

The award funding may be used for resident tuition and stipend and faculty and administrative support for the training program. However, it is expected that most (75% or more) of the funds will be used to support the residents. No portion of the award may be used to pay indirect costs.

There is no objection to reasonable stipend supplementation from institutional funds and research or training grants (other than those of the American Cancer Society). Such supplementation must not entail duties that will interfere with or detract from the program and must be reported to the Society.

CALENDAR FOR SUBMISSION OF PTACP RENEWAL APPLICATIONS			
Grant Start Date	Grant End Date	Renewal application	New Grant Starts
January 2018	June 2022	April 2020	July 2021
January 2019	June 2023	April 2021	July 2022
January 2020	June 2024	April 2022	July 2023
July 2021	June 2025	April 2023	July 2024
July 2022	June 2026	April 2024	July 2025

DATE	ACTIVITY
April 2020	Application due date
October 2020	Award notice
July 2021	Start of funding (grant ends June 2025)
July 2021	Begin date for first resident
July 2022	Begin date for second resident (begin year two for first resident)
April 2023	Renewal application due date
July 2023	Begin date for third resident (begin year two for second resident)
October 2023	Renewal award notice
July 2024	If successful, start of funding of renewal grant (one-year overlap with prior grant)
July 2024	Begin date for first resident, 2024 grant (begin year two for third resident, 2021 grant)

June 2025	End date of grant that began July 2021
July 2025	Begin date for second resident
April 2026	Renewal application due date
July 2026	Begin date for third resident

5. CHANGE OF PRINCIPAL INVESTIGATOR OR INSTITUTION

Transfer of the grant from one institution to another is not permitted.

During the period from the receipt of an application through the end of an award, a change of Principal Investigator requires authorization from the Society. Prior to a change, a request for the change must be submitted in writing and signed by an authorized official of the institution. To access the necessary form for change in principal investigator, go to <https://proposalcentral.altum.com>; submission instructions are in the appendix to the Policies.

In order to authorize the change, the American Cancer Society must receive the following:

- The request for change in writing, indicating the anticipated change date; and
- A biographical sketch form for the proposed principal investigator.

6. REQUIRED PROGRESS REPORTS

Physician Training Awards in Cancer Prevention are awarded with the requirement that the residents will provide summary reports to the American Cancer Society at the completion of their training. Notice of the due date and instructions for submitting these reports will be forwarded to each resident and program director. The form for annual progress reports is available at <https://proposalcentral.altum.com>; submission instructions are in the appendix to the General Policies.) The timely receipt of progress reports may be a factor in continuing funding.

MASTER'S TRAINING GRANTS IN CLINICAL ONCOLOGY SOCIAL WORK

1. DESCRIPTION OF MASTER'S TRAINING GRANTS IN CLINICAL ONCOLOGY SOCIAL WORK

The American Cancer Society annually awards grants to qualifying hospitals, medical centers, and community-based programs that train clinical oncology social workers to provide cancer patients and their families with psychosocial services.

The training must introduce second year students in a master's program to the special needs of individuals with cancer and their families and prepare them for direct clinical practice with this population.

The goals of the grant program are to:

- Educate social workers in knowledge and skills for oncology specialization.
- Define explicit criteria for state-of-the-art oncology social work training programs.
- Strengthen existing institutional training programs for oncology social workers.
- Promote development of additional high-quality training programs for oncology social workers.
- Support programs that train oncology social workers to meet the needs of diverse populations, including poor and medically underserved populations.

Tips for submitting a successful grant application are provided in the Appendix to the Application Instructions.

Please read carefully the requirements set forth below before completing the application. Prospective applicants who have questions regarding any of the program requirements should contact the Society for clarification prior to submission of an application. Questions should be directed to:

Virginia Krawiec, MPA
Scientific Director, Health Professional Training in Cancer Control
Stella Jones, Program Manager
404-329-5734 or stella.jones@cancer.org

2. REQUIREMENTS FOR INSTITUTIONS

Applications for these training grants typically originate from non-profit hospitals, medical centers, or community-based programs. These institutions must be affiliated with accredited schools of social work with concentrations in health care or mental health care. The application must include a letter of support from the local Division of the American Cancer Society.

Institutions should have:

- A. Organized oncology sections;
- B. A functioning multidisciplinary hospital cancer program;
- C. Active social work services that are well integrated into the institution's health care delivery programs;
- D. Affiliation as a master's student training site with accredited schools of social work having a health care or mental health concentration.
- E. Social work training program faculty participation in community service and/or in relevant professional organizations, i.e., the Society for Social Work Administrators in Health Care, the Association of Oncology Social Work, and the Association of Pediatric Oncology Social Workers.

- F. If applicable, approval from the American College of Surgeons Commission on Cancer for hospital cancer programs;
- G. If applicable, approval from the Joint Commission on Accreditation of Hospitals (JCAHO).

The proposed program for the trainee must:

- A. Provide an opportunity to concentrate in oncology. The program must **demonstrate** that the trainee will develop clinical skills in the management of the cancer patient and family (*i.e., the majority of the student's caseload must be oncology patients*).
- B. Indicate the **focus** of the training—pediatric or adult practice.
- C. Identify a field instructor (primary social work supervisor) for the master's trainee who:
 - has a degree from an accredited school of social work;
 - is a licensed clinical social worker;
 - has two years of supervisory and/or field instructor experience; and
 - has a minimum of two years oncology practice experience. [OSW-C preferred (*if relevant to practice area*)];

See Instructions Appendix C: Examples of Activities/Experience That Demonstrate Expertise in Oncology Social Work for additional ways to convey the qualifications of the field instructor and program faculty.
- D. The social worker must be located at the training site and will be responsible for the trainee's program within the medical or cancer center.

In the event that the field instructor does not meet the criteria for supervisory or oncology practice experience or licensure, it is acceptable to propose a collaborative arrangement among program faculty whose combined qualifications will provide appropriate support for the trainee. The rationale for the arrangement and logistics must be clearly described in the application.

- E. Identify individuals at the training site who will serve as program faculty for the proposed training. This faculty may include other social work staff or staff from other departments, such as medicine, nursing, pastoral care, etc.

3. REQUIREMENTS OF MASTER'S TRAINEES

The minimum requirements of candidates for the training grants are:

- A. The nominees must be second-year students in a master's program in social work or advanced standing students (those with a bachelor's degree in social work and accepted to a master's degree program).

Nominated students are not required to be United States (U.S.) citizens. However, it is the responsibility of the institution to determine and certify that the visa status of any student who is not a U.S. citizen will allow them to remain in this country for the duration of the ACS-funded training. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.

- B. Prior social work experience in health care is desirable.
- C. Demonstrated interest in the psychosocial needs of oncology patients and their families.

4. TERM AND FUNDING

Master's Training Grants in Clinical Oncology Social Work become effective on July 1 and may be competitively renewed. Beginning in July 2012, the grant term will be two years with annual funding of \$12,000. This includes a trainee award of \$10,000 and \$2,000 for faculty professional development, such as travel to professional meetings, in-service training, etc. Professional travel for both the field instructor and the student (e.g., to attend AOSW or APOSW conferences) is encouraged.

Institutions that receive awards will be asked each year to nominate a **second**-year master's degree student trainee, with a deadline of June 1. (Traineeships are generally awarded for the academic year; a block placement is also acceptable.) *Note: if an institution is unable to nominate a student, the grant will be put on hold until a student is approved. A grant may not be put on hold for longer than one year.*

If a student leaves the program before completing training, the grant will either be put on hold or cancelled depending on whether it is the first or second year of the grant.

5. GRANT AMOUNT AND PAYMENTS

The total amount of the Master's Training Grant in Clinical Oncology Social Work is \$24,000. No portion of the funding may be used for indirect costs. Awarded institutions will be asked to nominate a student to receive the training stipend. The stipend may be supplemented by the institution, provided that the American Cancer Society is notified of the amount and source of the supplementation.

Grant payments of \$12,000 will be made once annually at the beginning of each year of the grant. The American Cancer Society requires that all grant payments be made to the sponsoring institution, and all checks mailed to that institution.

Institutions shall be responsible for issuing the appropriate IRS tax filings for all individuals receiving compensation from American Cancer Society grants and shall be responsible for withholding and paying all required federal and state payroll taxes with regard to such compensation. Thus, these and any other tax consequences are the responsibility of the individual recipient and the sponsoring institution.

6. REQUIRED REPORTS

Traineeships will be awarded with the requirement that by June 1 of the training grant year:

- A. Each trainee submits a report describing the training received and the trainee's personal participation at the institution during the tenure of the award.
- B. The field instructor supervising the trainee submits a report of the trainee's work during the tenure of the award.

The Society will not act on applications from a department in an institution until all required reports from former trainees and their field instructors or preceptors are received. The form for annual progress reports is available [here](https://proposalcentral.com) at <https://proposalcentral.com>. (submission instructions are in the appendix to this document. The timely receipt of progress reports may be a factor in continuing funding.

7. CHANGE OF INSTITUTION/FIELD INSTRUCTOR

Recipients of a Training Grant in Clinical Oncology Social Work may not transfer their grant to another institution.

During the period from the receipt of an application through the end of an award, a change of field instructor requires approval by the Society. Prior to a change, the American Cancer Society must receive the following:

- the request for change in writing, indicating the anticipated change date;
- a biographical sketch for the proposed field instructor. Contact the American Cancer Society to request the appropriate form.

Please note that if a change in field instructor is anticipated when the initial application for a two-year grant is submitted, the proposed change must be described therein.

APPENDIX A: HELPFUL TIPS FOR THE MASTER'S TRAINING GRANT IN CLINICAL ONCOLOGY SOCIAL WORK APPLICATION

The following suggestions are offered by grant reviewers to facilitate submission of successful grant applications. The complete criteria used by the peer reviewers are included in the Appendix to the Instructions.

INSTITUTION AND DEPARTMENT

- Emphasize demographic diversity (racial, economic, ethnic) and disease diversity (diagnoses, treatments, stage of disease) of patient population.
- Highlight the multidisciplinary approach and discuss specific ways in which social work plays a prominent role in the institution.
- If the institution is relatively small or specialized (i.e. inpatient or outpatient only), describe collaborative arrangements whereby the student will be exposed to a broader continuum of care (e.g., visiting other settings, observing team meetings or patient groups).
- Provide a comprehensive and clear description of the training environment (e.g. academic affiliations, conferences, psychosocial seminars, indicators of faculty time commitment).

INSTRUCTOR AND FACULTY

- Emphasize the strengths, skills and experience of the field instructor that are relevant to psychosocial oncology.
- Be specific regarding the teaching methods that the field instructor will use to meet the training objectives.
- Be specific regarding how much time the field instructor will be available for formal and informal supervision of the student.
- Provide clear information regarding the supervisory experience of the field instructor with both students and staff.
- Provide specific information about supplemental supervision, teaching, and support that other faculty will provide the student.
- Emphasize the relevant expertise of the faculty in psychosocial oncology.
- Don't overlook the importance of other non-social work faculty in enhancing the learning experience of the student – for example, Child Life specialists teaching about child development, or Clinical Nurse specialists teaching the basics of oncology diagnoses and treatment side effects.
- Highlight all the relevant learning opportunities within your setting, e.g., departmental staff meetings that demonstrate how service delivery procedures are modified or implemented, in-services, hospital grand rounds, etc.
- Do not include faculty from an affiliated school of social work as hospital faculty unless they will be providing specific individualized training related to the student's placement at your facility.
- Provide descriptive information about licensure and certification for clarification.

PROGRAM

The program section of the application should provide evidence of learning activities that will enable the trainee to achieve the desired outcomes of the ACS training grant program, including preparation for an oncology social work career. Successful applications often include:

An orientation to the setting as well as the role of the oncology social worker in the context of the setting

Example: The trainee's orientation will include:

- A tour of the medical center and affiliated organizations
- Introduction to administrative and clinical staff
- Review of the employee manual, etc.

A calendar of learning activities that are scheduled on a weekly and/or monthly basis throughout the grant period

Example:

1. September: Orientation, assignment of first inpatient case, team meetings
2. October: Grand rounds, observe family support group, etc.

Descriptions of learning activities that teach students the skills related to the areas listed below. Emphasize any collaboration between the department of social work and other departments or disciplines in providing service delivery to patients and families, particularly related to oncology.

- Working with clients with a range of cancer diagnoses and prognoses.
Example: The student will carry a caseload of three to five inpatients on the bone marrow transplant unit and three to five patients in the outpatient radiation dept. (if a range is not provided, include a rationale for specialization).
- Opportunities to provide services to patients in the medical setting as well as the community.
Example: The student will facilitate a support group for women with breast cancer in the medical center and will co-facilitate a bereavement group sponsored by the hospice affiliated with the center.
- Activities that relate to teaching cultural competency, which includes not just ethnicity but also the socioeconomically disadvantaged and, to the extent possible, sexual orientation.
Example: The student will attend an in-service training related to working with diverse or underserved populations.
- Activities that strengthen skills in carrying out each of the following social work functions: psychosocial assessment, individual, family and group counseling, case management, discharge planning, education, and advocacy.
Example: In the first three months of the practicum the student will be assigned a caseload of five to eight oncology patients and family members in the radiation oncology clinic. The student will carry out all social work functions for these clients including completion of psychosocial assessment, etc.
- Activities that acquaint the student with community agencies and resources.
Example: The student will assist with the ACS-sponsored breast cancer screening to be conducted in the community in October.
- Exposure to complementary cancer treatments
- Activities that enhance the students' awareness of their own strengths and competencies as well as provide techniques to manage stressors, multiple demands, etc.
- Activities that expose the student to research, or allow participation in research, are strongly encouraged.

DOCTORAL TRAINING GRANTS IN ONCOLOGY SOCIAL WORK

1. DESCRIPTION OF DOCTORAL TRAINING GRANTS IN ONCOLOGY SOCIAL WORK

The American Cancer Society annually awards Doctoral Training Grants in Oncology Social Work to qualifying doctoral students at schools of social work that train individuals to conduct research relevant to oncology social work. The goal of this program is to strengthen oncology social work practice by providing assistance for doctoral study in Oncology Social Work. This

education will qualify the recipient for the award of a doctoral degree in social work. These awards are designed to provide outstanding students in oncology social work with support during all phases of their doctoral program.

Please read carefully the eligibility and other requirements set forth below before completing the application. Prospective applicants who are unsure of their eligibility or any other of the program requirements should contact the Society for clarification prior to submission of an application. Questions should be directed to:

Virginia Krawiec, MPA
Scientific Director, Health Professional Training in Cancer Control
Stella Jones, Program Manager
404-329-5734
stella.jones@cancer.org

2. REQUIREMENTS FOR PROGRAM

- i. The program must be offered within an accredited academic institution located in the United States that can award a doctoral degree in social work.
- ii. The program must offer an affiliation with an institution that has an active program in psychosocial oncology research, an organized multidisciplinary program in cancer control or cancer care or access to other resources that allow the applicant to participate in educational and research activities related to oncology social work.
- iii. The institution must name as preceptor to the trainee, an individual with the following qualifications:
 - Must be a doctoral prepared social worker that resides in the school of social work.
 - Must be qualified to chair or serve as a member of the trainee's doctoral dissertation committee as defined by the degree-granting institution.
 - Must provide evidence of psychosocial/oncology research experience by first authored publications of empirical study in peer-reviewed journals or other professional publications.
 - Must provide evidence of successful research grant applications at local, state, or national levels, including foundations.
- iv. The program of study must be planned with faculty who are experts in the applicant's field of study and can guide the student's educational experiences.

3. REQUIREMENTS OF APPLICANTS

The following eligibility requirements must be met:

- A. The applicant must have master's degree in social work.
- B. The applicant must demonstrate a commitment to a career in oncology social work as evidenced by recent experience, education, and/or research. (At least one year of experience in oncology, cancer control, health or a health care setting preferred, but not required).

- C. The applicant must be currently enrolled in or applying to a doctoral degree program in social work. If an applicant is not yet enrolled in a PhD program, the applicant must meet requirements for doctoral study and must have been accepted by the institution to which s/he has applied at the time of funding.
- D. The applicant must project a full-time program of study that integrates oncology social work and provides evidence of faculty support for the program of study. *Students are expected to be thinking about their research topic in all phases of their program and, as a condition of funding, conveying the progression of their ideas in their reports to the American Cancer Society.* To qualify for funding for the dissertation phase of the doctoral program, the student must conduct a dissertation relevant to oncology social work and clearly describe/document this in the research plan.
- E. Applicants are not required to be United States (U.S.) citizens. However, any applicant who is not a U.S. citizen must hold a visa that will allow him or her to remain in the U.S. long enough to complete the degree program and graduate. It is the responsibility of the institution to determine and document the visa status of any non-citizen recipient of ACS funds. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.

Successful applicants and their mentors are also expected to attend the American Cancer Society institute for doctoral students, held at either the annual Society for Social Work Research conference or the Association for Oncology Social Work meeting. Recipients at the dissertation phase will be expected to present their research at the student institute.

4. SELECTION CRITERIA

Criteria considered by the peer reviewers are listed below. All criteria listed do not have equal importance.

- GRE scores (if available)
- Grade point average
- Professional education
- Continuing education (if applicant has been practicing as MSW)
- Relevant experience
- Membership in professional organizations
- Evidence of volunteer activities
- Other professional contributions
- Honors and awards
- Research experience
- Recommendations
- Appropriate professional goals
- Rationale given for choice of doctoral program
- Resources of university
- University support
- Faculty preceptor / dissertation chair
- Other faculty resources
- Fit between applicant, goals, and program
- Integration of oncology in doctoral study

Relevance of plan of study and courses to oncology social work

Research Plan of Applicant

(For applicants who have not yet achieved candidacy)

- Description of the problem - topic identified
- Literature review or reason for interest in the topic
- Potential contribution to oncology social work
- Relevance to previous research
- Available faculty resources and scientific expertise

(For applicants close to or at the dissertation phase)

- Purpose and title of study
- Background/review of literature/significance
- Significance to oncology social work
- Relevance to previous research
- Design / methodology
- Composition of the dissertation committee

The complete criteria used by the peer reviewers are included in the Appendix to these Policies.

5. TERM OF TRAINEESHIP

The grant is intended to provide support for a minimum of one year and a maximum of four years of full-time study in a graduate program in social work leading to a doctoral degree. Grants become effective July 1 and may be prorated if the student graduates before the end of the academic year.

The initial application is for a two-year grant with the possibility of a noncompetitive renewal. A satisfactory progress report must be submitted after the first year of grant participation in order to obtain funding for the second year. (See Required Reports.)

6. GRANT AMOUNT AND PAYMENTS

Training Grants become effective on July 1 and must be renewed annually. The grant provides up to \$20,000 annually for tuition and related educational expenses including subsistence. The American Cancer Society strongly encourages schools of social work to contribute tuition, health insurance and student fees to all predoctoral and dissertation grantees.

Up to \$5,000 per year of the grant may be used to allow the student and the faculty mentor to attend the Society of Social Work Research (SSWR) annual conference, and other professional conferences of their choosing. Participation in the SSWR conference is mandatory for all recipients of this award.

The institution may not charge indirect costs to the scholarship.

7. REQUIRED PROGRESS REPORTS

In order to receive continued funding, candidates must:

- Maintain full-time enrollment in a doctoral program, and
- Provide reports documenting satisfactory progress toward the doctoral degree and ongoing commitment to oncology social work as evidenced by courses selected, papers and projects completed for coursework, as well as professional presentations and publications

The first (and third) year progress report(s) must be submitted by May 1 if the applicant wishes to continue funding. Renewal is not guaranteed.

Within six weeks of completion of the grant period, the trainee must submit a summary report describing the education and research activities in which s/he participated. The report must also include a general audience summary, in nontechnical language, of the trainee's dissertation research project findings. The Society will not act on applications from a department in an institution until all required reports from former trainees are received. The American Cancer Society will provide a form for this purpose during the final year of the grant.

8. CHANGE OF INSTITUTION/PRECEPTOR

Recipients of a Doctoral Training Grant in Oncology Social Work may not transfer their grant from one institution to another.

During the period from the receipt of an application through the end of an award, change of preceptor requires written notice to the Society. Prior to a change, the American Cancer Society must receive a request for the proposed change in writing, indicating the anticipated change date and the reason for the change. The request must address the following:

- The total number of graduate and postdoctoral student who will be directly supervised during the term of scholarship.
- A representative list of previous students, their present employing organization, and position title or occupation (limit to five).
- Preceptor's ongoing research activities that relate to your study.
- A brief description of preceptor's relationship to date with you.

A Preceptor/Dissertation Chair Biographical Sketch completed by the proposed advisor must also be included. This form is part of the application; contact the American Cancer Society to obtain a copy.

GRADUATE SCHOLARSHIPS IN CANCER NURSING PRACTICE

1. DESCRIPTION OF GRADUATE SCHOLARSHIPS IN CANCER NURSING PRACTICE

The goal of this program is to strengthen nursing practice by providing assistance for advanced preparation in the following fields of cancer nursing: clinical practice, education, and administration. This education will qualify the scholarship recipient for the award of a master's degree in nursing or doctorate of nursing practice (DNP).

Please read carefully the eligibility and other requirements set forth below before completing the application. Prospective applicants who are unsure of their eligibility or any other of the

program requirements should contact the Society for clarification prior to submission of an application. Questions should be directed to:

Virginia Krawiec, MPA

Scientific Director, Health Professional Training in Cancer Control

Stella Jones, Program Manager

404-329-5734

stella.jones@cancer.org

2. REQUIREMENTS FOR PROGRAM

- A. The program must be offered within an academic institution in the United States that can award a master's degree in nursing or DNP with demonstrated integration of cancer nursing content, [or the applicant must demonstrate previous advanced practice oncology nursing training.](#)
- B. If the academic program does not offer a formal oncology nursing curriculum, the institution and applicant must document how appropriate didactic and clinical/practical oncology content will be obtained. Specifically, the application must identify cancer-related course content that is available in other academic units, e.g., cancer biology, cancer genetics, cancer prevention and control, cancer epidemiology, oncology social work, and/or medical school cancer courses. If the applicant is pursuing a clinical practice degree, the application must describe opportunities for clinical mentorship and supervision from advanced practice oncology nurses or other oncology specialist(s).
- C. It is recommended that the school of nursing within or associated with the academic institution offer a program of study compatible with the courses and content outlined in "The Master's Degree with a Specialty in Advanced Practice Oncology Nursing Curriculum Guide" (4th Edition, 2003), published by the Oncology Nursing Society with input from the American Cancer Society.
- D. The program of graduate studies in nursing must be accredited by the National League for Nursing or the Commission on Collegiate Nursing Education.
- E. The institution must designate a faculty member responsible for the oncology nursing content in the curriculum or program of study proposed for the applicant.
- F. Ideally, a clinical practice component for either a master's or DNP degree should include:
 - 1) an affiliation with an organized program of services that offers a comprehensive, coordinated, multidisciplinary program for cancer control including prevention, early detection, treatment, ambulatory care, acute care, home care, hospice care, rehabilitation, and other types of follow up services; and
 - 2) a strong clinical component including courses with specific objectives, learning activities, and evaluation plans consistent with curriculum guidelines for advanced preparation in cancer nursing.

3. REQUIREMENTS OF APPLICANTS

- A. The applicant must be currently enrolled in or accepted in a master's or DNP degree graduate program with demonstrated integration of cancer content. Note: individuals who have

previously received a Master's Degree Scholarship in Cancer Nursing who wish to obtain a Doctorate of Nursing Practice Degree are eligible to apply for this scholarship program.

Applications from students in post-master's certificate programs who are pursuing a program of study that will qualify them to practice as an advance practice nurse with a specialization in oncology will be considered on a case by case basis. For example, an applicant who has already earned a master's in nursing would be considered for Scholarship funding. These students and applications must meet all the other criteria for eligibility (e.g., program accreditation, length of study, etc.).

- B. The applicant must meet requirements for graduate study and at the time of funding have been accepted by the institution to which s/he has applied. The institution must verify the applicant's acceptance into the master's or DNP program.
- C. All applicants must have a current license to practice as a registered nurse. Students in "bridge" programs must have passed the N-CLEX examination and updated their status with the ACS Program Office by the time the award begins.
- D. Applicants are not required to be United States (U.S.) citizens. However, any applicant who is not a U.S. citizen must hold a visa that will allow him or her to remain in the U.S. long enough to complete the degree program and graduate. It is the responsibility of the institution to determine and document the visa status of any non-citizen recipient of ACS funds. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.

4. SELECTION CRITERIA

A successful applicant is one who:

- Has work experience in oncology, e.g., cancer nursing or a related field (this is highly preferred);
- Is involved in cancer-related professional and academic organizations;
- Is involved in cancer-related volunteer organizations;
- Has published or contributed to scholarly publications, presentations and creative works;
- Is the recipient of professional and academic awards and honors;
- Has considered program content, faculty, and clinical resources related to cancer in selecting a graduate program;
- Has a focus for scholarly activity in a specific area of cancer nursing;
- Has strong letters of recommendation from two qualified professionals;
- Has made a career commitment to cancer nursing; and
- Has formed explicit and realistic professional goals.

The complete criteria used by the peer reviewers are included in the Appendix to these Policies.

5. SCHOLARSHIP TERM AND FUNDING

The scholarship is intended to provide support for a minimum of one year and a maximum of two years of study in a graduate program in nursing leading to a master's or DNP degree. Scholarships become effective on July 1 and must be renewed at the end of the first year. Second year funding is contingent upon satisfactory progress in the program as documented in the annual progress report and may be prorated if the student will graduate before the end of the academic year.

The master's and DNP degree scholarship provides \$10,000 annually for tuition and related educational expenses including subsistence. Allowable expenses include, but are not limited to stipend, local transportation costs, computers, books and journals, professional organization membership dues, education and research-related conferences and workshops, health and dental insurance, research-related costs (research assistant, equipment and supplies, etc.) Subsistence expenses are living expenses during the student's time in the doctoral degree program.

Students who receive more than one year of funding may carry forward to the subsequent year any unexpended funds. Specifically, funds remaining at the end of the first year of a two-year scholarship may be used in the second year.

Scholarship payments will be made to the institutional office designated on the activation form; payments are made once yearly at the beginning of the grant period. The institution may not charge indirect costs to the scholarship.

6. REQUIRED PROGRESS REPORTS

At the end of the first year of scholarship funding, the grantee shall submit a progress report describing the education and research activities in which s/he participated. This report shall be submitted to the American Cancer Society by April 1 if the applicant wishes to continue funding for a second year.

If graduate study has been completed, within sixty days of completion of the grant period, the trainee must submit a summary report.

7. CHANGE OF INSTITUTION/ADVISOR

Recipients of a Graduate Scholarship in Cancer Nursing Practice may not transfer their scholarship from one institution to another.

During the period from the receipt of an application through the end of an award, change of advisor requires written notice to the Society. Prior to a change, the American Cancer Society must receive the following:

- notice of change in writing, indicating the anticipated change date;
- biographical sketch of the new faculty advisor completed by the advisor. The biosketch form is part of the application; contact the American Cancer Society to obtain a copy.

APPENDIX A: CRITERIA FOR THE REVIEW OF APPLICATIONS

The following items are used by reviewers in evaluating applications for the Graduate Scholarship in Cancer Nursing Practice:

- If the application is a resubmission, comment on the adequacy of the response to the prior review.

Candidate Information (Background and Experience)

- Type of graduate (master's or DNP) or **certificate** program (is it a distance learning program?); per cent completed; applicant's GPA
- Professional education to date
- Adequate (e.g. 15 hours over three years) continuing education relevant to oncology
- Current certification in cancer nursing or other relevant specialty certification
- Professional experience in oncology, e.g., cancer nursing or related field, such as oncology social work, oncology research coordinator, public health, etc.
- Membership in relevant professional organizations – consider length of involvement and any leadership positions
- Cancer-related volunteer activities – consider length of involvement and any leadership roles

Professional Contributions and Awards

- Presentations – consider types (clinical, research, work-related) and location, e.g., local, national, etc.
- Refereed journal articles and book chapters
- Non-refereed materials (articles, commentaries, work place guidelines, patient education materials, newsletters, etc.)
- Research – consider role, e.g., PI of a research project or key leadership role on someone else's project versus data manager, research assistant
- Professional honors and awards
- Scholastic awards or funded scholarships

Professional goals: particularly in the context of any cancer-related experience - should be clear and realistic given prior experiences and strength of the graduate program

Graduate Program and Resources (as described by applicant and advisor)

- Strength of rationale given for choice of academic program
- Fit between the applicant and program – consider appropriateness for applicant’s educational needs and career goals
- Evaluation of oncology emphasis in the program – is there oncology content and if relevant, clinical supervision by an advanced practice oncology nurse or other oncology specialist? If a distance learning program, is there evidence of successful arrangement of local clinical placements with supervision by oncology specialists?
- Evaluation of program faculty – expertise of advisor and other faculty in oncology nursing or another oncology discipline

Letters of Recommendation

Evaluation of letters of recommendation, especially enthusiasm for the candidate’s qualifications for graduate school

DOCTORAL DEGREE SCHOLARSHIPS IN CANCER NURSING

1. DESCRIPTION OF DOCTORAL DEGREE SCHOLARSHIPS IN CANCER NURSING

This program supports advanced preparation in cancer nursing research, to 1) qualify the recipient for a doctoral degree in nursing or a related field of research, and 2) prepare the graduate for a career as a cancer nurse scientist.

Eligibility and other requirements are set forth below. Prospective applicants who are unsure of their eligibility or any other requirements should contact the Society for clarification prior to submitting an application. Direct questions to:

Virginia Krawiec, MPA
Scientific Director, Health Professional Training in Cancer Control

Stella Jones, Program Manager
404-329-5734 stella.jones@cancer.org

2. REQUIREMENTS FOR DEGREE PROGRAM

- A. The program must be offered at an accredited academic institution in the United States that can award a doctoral degree in nursing or a related field of research (for example, public health).

- B. The program must offer an affiliation with an organized multidisciplinary program in cancer control or cancer care or access to other resources that allows the student flexibility to participate in educational and research activities related to cancer nursing.
- C. The program of study must be planned with an advisor and other faculty who are experts in the applicant's field of study and will provide guidance in educational and research activities.

3. REQUIREMENTS FOR APPLICANTS

- A. The applicant must be currently enrolled in or accepted to a doctoral degree program in nursing or a related field of research. Students in programs that award the doctorate of nursing practice (DNP) are not eligible for this program but may apply for a Graduate Scholarship in Cancer Nursing Practice.
- B. The applicant must have a current license to practice as a registered nurse, unless he or she is not a United States (U.S.) citizen or permanent resident.
- C. Any applicant who is not a U.S. citizen must hold a visa that allows him or her to remain in the U.S. long enough to complete the degree program and graduate. It is the responsibility of the institution to determine and document the visa status of any non-citizen recipient of ACS funds. Note: the American Cancer Society will not intercede on behalf of non-citizens whose stay in the U.S. may be limited by their visa status.
- D. The applicant must propose a full-time program of study that integrates cancer nursing and provides evidence of faculty support. Scholarship recipients must take a minimum of 18 credit hours or six courses per year (unless coursework has been completed and the student accepted to candidacy).
- E. The applicant must demonstrate a commitment to cancer nursing, as evidenced by recent experience, education, and/or research in the specialty area.

4. SELECTION CRITERIA

A successful applicant will provide evidence of:

- Relevant professional experience in oncology, e.g., cancer nursing or a related field;
- Involvement in professional organizations, including leadership roles;
- Involvement in activities of the American Cancer Society or other relevant volunteer organizations;
- Clear, explicit, and realistic professional goals;
- Consideration of program components, particularly oncology content, in selecting a doctoral program;
- Conducting or planning to conduct research that is important, methodologically sound, and relevant to the health of people affected with cancer or at risk for cancer;
- Commitment from a faculty advisor who is experienced in the student's area of study and will provide guidance in academic and research activities;

- Selection of a doctoral program that will support the student’s professional goals and research; and
- Dedication to cancer nursing research.

As appropriate to the length of time since completion of an undergraduate or entry-level master’s degree in nursing, a successful applicant will show evidence of:

- A developing record of publications, presentations, and/or other creative scholarly work;
- Receipt of various academic and/or professional awards and honors.

The complete criteria used by the peer reviewers are included in the Appendix to the Instructions.

5. TERM OF SCHOLARSHIP

The scholarship supports from one to four years in a program leading to a doctoral degree. Scholarships become effective July 1 and may be prorated if the student graduates before the end of the academic year.

The initial application is for a two-year grant, which may be renewed for an additional two years without competition from new applicants. Documentation of satisfactory progress in the graduate program and approval by peer review committees is required for renewal. Scholarship recipients intending to request a non-competing renewal of their grant (to receive third and fourth year funding) must submit a grant application for a Doctoral Degree Scholarship in Cancer Nursing–Noncompeting Renewal, which is due on October 15 of the second year of the grant. The application materials are available on proposalCENTRAL.

Students who are admitted to BSN-PhD programs without first having earned a master’s degree are eligible to apply for the Doctoral Degree Scholarship in Cancer Nursing. However, they should first apply for the Graduate Scholarship in Cancer Nursing Practice. Once a student starts doctoral coursework, even if it is concurrent with master’s level coursework, she or he may apply for the Doctoral Degree Scholarship in Cancer Nursing.

6. SCHOLARSHIP FUNDING

The doctoral degree scholarship provides up to \$15,000 annually for tuition and related educational expenses including subsistence. These include, but are not limited to: stipend, local transportation costs, computers, books, journals, professional organization membership dues, education and research-related conferences and workshops, health and dental insurance, research-related costs (research assistant, equipment, and supplies, etc.).

Subsistence expenses are living expenses during the student's time in the doctoral degree program.

Students who receive more than one year of funding may carry forward to subsequent years any unexpended funds. Specifically, funds remaining at the end of the first year of a two-year scholarship may be used in the second year or carried over to a renewal grant after the original scholarship.

Scholarship payments will be made yearly, in July, to the institution office designated on the activation form. The institution may not charge indirect costs to the scholarship. The award is not transferable and may not be awarded to other students in the event the recipient withdraws from the degree program.

7. REQUIRED REPORTS

Within six weeks of the end of the grant period, the trainee must submit a summary report describing the education and research activities in which they participated. The report must also include a general audience summary, in nontechnical language, of the trainee's dissertation research project findings. The Society will not act on applications from a department in an institution until all required reports from former trainees are received. The ACS provides a form for this purpose during the final year of the grant.

8. CHANGE OF INSTITUTION OR ADVISOR

Recipients of a Doctoral Degree Scholarship in Cancer Nursing may not transfer their scholarship from one institution to another.

After the Society receives an application, a change of advisor requires a written request that contains:

- The proposed change date.
- The reason for the change.
- The total number of students the new advisor will directly supervise during the term of scholarship.
- A list of five of the proposed advisor's previous students, showing the present employer and position of each.
- The proposed advisor's ongoing research activities relevant to the grantee's study.
- A brief description of the proposed advisor's relationship to date with the grantee.
- A biographical sketch completed by the proposed advisor. This form is part of the application; contact the American Cancer Society to obtain a copy.

INTERNATIONAL PROGRAM

AUDREY MEYER MARS INTERNATIONAL FELLOWSHIPS IN CLINICAL ONCOLOGY

1. DESCRIPTION OF AUDREY MEYER MARS INTERNATIONAL FELLOWSHIPS IN CLINICAL ONCOLOGY

The purpose of the Audrey Meyer Mars International Fellowship in Clinical Oncology is to provide one year of advanced training in clinical oncology at participating cancer centers in the United States to qualified physicians and dentists from other countries, particularly countries where advanced training is not readily available. Applications for training in basic cancer research will not be accepted for the award.

Training will be conducted at one of the United States National Cancer Institute designated cancer centers participating in the program. A list of these cancer centers is included in these Policies.

2. FELLOWSHIP AWARD

The total Fellowship Award that may be requested is US\$65,000. The stipend attached to the award may not exceed US\$60,000 and must be determined according to the experience of the selected Fellow and the salary schedule of the institution as appropriate to the training level (postgraduate year). The award also provides a travel allowance equivalent to tourist/economy-class airfares between the home country of the Fellow and the US city in which the institution is located. No additional allowance will be included for travel of dependents or for shipment of automobiles or household effects. An appropriate amount may be included for travel to professional meetings in the United States as approved by the institution during the Fellowship period. No portion of the funding may be used for indirect costs.

Fellows also may request up to US\$5,000 reimbursement of costs associated with taking the tests for ECFMG certification. Once the Fellow has arrived at the sponsoring institution, s/he should submit a letter requesting reimbursement along with detailed receipts for testing fees and associated expenses, such as review books, travel to the test site, etc.

3. REQUIREMENTS FOR APPLICANTS

- Applicants **must** be qualified physicians or dentists who have demonstrated an interest in clinical cancer management and who desire advanced training in clinical oncology. Preference will be given to applicants from countries where such training is not readily available.
- Applicants **must be accepted for training** by one of the participating institutions and **must have fulfilled all requirements** of the institution and of the state in which the institution is located. Since institutional requirements vary, applicants should contact the institution(s) of their choice for specific information.

All applicants for post-graduate medical fellowship training **must be certified** by the Education Commission for Foreign Medical Graduates (ECFMG). Information is available at: <http://www.ecfm.org>. Up to \$5,000 is available to reimburse each successful candidate for the cost of taking these tests, which may include reimbursement for associated expenses, such as review books, travel to the test site, etc. The American Cancer Society will arrange the payment of these funds to the Fellow after his or her arrival at the sponsoring institution for the fellowship training.

Graduates of foreign dental schools also are eligible for the AMM Fellowship. However, required credentials for post-graduate training vary from state to state. Consequently, it is advisable to contact the board of dentistry of the state in which training is desired to obtain specific information. Information is available at: <http://www.ada.org/en/education-careers/licensure/state-licensure-for-the-international-dentists>.

- Applicants **must** provide a copy of the statement of need letter from the ministry of health in their country of nationality or most recent permanent legal residence outside the United States.

Prospective applicants who are unsure of their eligibility or any other of the program requirements should contact the Society for clarification prior to submission of an application. Questions should be directed to:

Virginia Krawiec, MPA
 Scientific Director, Health Professional Training in Cancer Control
 Stella Jones, Program Manager
 404-329-5734
 stella.jones@cancer.org

4. APPLICATION PROCESS

Prospective fellows may apply to more than one institution. Applicants should contact directly the institution(s) of their choice requesting the institution's requirements and process for acceptance into the specific clinical training program desired. Because of the time needed to fulfill administrative requirements, applicants should contact the institution(s) of their choice as early as possible. Participating institutions may have differing deadlines for receipt of the application form, and it is the responsibility of applicants to ascertain the deadline of the institution to which they are applying.

Institutions will submit the AMM application to the American Cancer Society on behalf of an accepted candidate. In order to apply for the fellowship, the application must be submitted electronically via proposalCENTRAL at <https://proposalcentral.altum.com/> by the Sponsoring Institution.

Note that the American Cancer Society cannot accept applications submitted directly by candidates.

5. REQUIREMENTS FOR INSTITUTIONS

- Sponsoring United States institutions are those designated by the National Cancer Institute as a Clinical or Comprehensive Cancer Center.
- The institution must identify an established oncology expert to serve as a sponsor/mentor to supervise and guide the candidate in his/her program. **The mentor must provide evidence of clinical expertise in the applicant's area of interest and successful mentoring of prior faculty.**
- Institutions should review applicant's qualifications to determine if all institutional requirements are met. Institutions should not submit applications for candidates they would not accept for training.
- Institutions should complete Part II of the application for candidates that they would accept for training. This section should include a detailed description of the training program

planned for the Fellow, documenting the Fellow's duties and responsibilities to the institution as well as the institution's commitments to the Fellow. The candidate must agree to the program *before* the application is submitted to the American Cancer Society.

- Institutions must submit the completed application electronically on proposalCENTRAL by February 1 for Fellowships to begin in the same calendar year.
- US Institutions must agree not to recruit Fellows sponsored by the Audrey Meyer Mars program for permanent positions.

6. SELECTION OF CANDIDATES

The American Cancer Society is responsible for the selection of grant recipients. Approved applications from participating institutions will be evaluated on a competitive basis.

Institutions will be notified of the approval or disapproval of individual applications and funding decisions. Notice of the award will be sent to both the successful candidate and the institution in early May for a Fellowship to begin on a date agreed to by the Fellow and the institution. The starting date should be within one year of the award of the Fellowship, although in unusual circumstances the Society may agree to postpone the starting date. The request for a postponement must be made in writing by the institution and must outline the reasons for the delay.

Institutions are requested to notify candidates whose applications are not approved.

7. OBLIGATIONS OF FELLOW

- Successful candidates will be asked to certify that they will return to their home countries upon completion of their training.
- Fellows must submit a final written report of their training and related activities to the American Cancer Society during the last month of their Fellowship. The mentor at the sponsoring institution is required to co-sign this report.

8. GRANT PAYMENTS, FINANCIAL RECORDS, AND REPORTS

The Fellowship grant will be made directly to the institution, which will pay stipend and travel allowances to the selected Fellow and arrange for any appropriate payroll deductions. Institutions must maintain separate accounts for each grant, with substantiating invoices available for audit by representatives of the American Cancer Society. The Society is not responsible for expenditures made prior to the start date of the grant, for commitments against a grant not paid within 60 days following the expiration date, or any expenditure that exceeds the total amount of the award.

A report of expenditures must be submitted within 90 days of the expiration date of the grant as indicated in the award letter. Signatures of the sponsor and the institution's financial officer are required. **Any unexpended funds must be returned to the Society.** Noncompliance may result in the withholding of payment on all grants in effect at the recipient institution, or grants that

may be awarded in the future, until reports are received. To access the necessary forms, please go to <https://proposalcentral.altum.com>.

9. PASSPORTS AND VISAS

Fellows will be responsible for fulfilling all requirements to obtain passports and visas, including medical licensing tests. The host institutions will document Fellowship appointment, financial commitments, and the place and purpose of appointments.

10. HEALTH AND ACCIDENT INSURANCE

The American Cancer Society cannot assume responsibility for medical expenses incurred by Fellows during the tenure of their awards. Successful candidates should insure themselves against health and accident risks.

APPENDIX: 2020 - AUDREY MEYER MARS PARTICIPATING INSTITUTIONS LISTING

CALIFORNIA

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Director, Chao Family Comprehensive
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**Stephen Gruber, MD, PhD, MPH
Director,
Norris Comprehensive Cancer Center**

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**Steven Rosen, MD
Director, City of Hope Comprehensive
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**Khaled Samer, MD, Director,
Hematology/HCT BMT Fellowship
City of Hope Comprehensive Cancer
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Phone: 626-218-2405
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CONNECTICUT

**Charles S. Fuchs, MD, MPH
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333 Cedar St. PO Box 208028
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Candace S. Johnson, PhD
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Craig B. Thompson, MD
President and CEO
Memorial Sloan-Kettering Cancer
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APPENDIX A: GUIDELINES FOR MAINTAINING RESEARCH AND PEER REVIEW INTEGRITY

I. Scope and Policy Statement

The American Cancer Society (the “Society” or “ACS”) seeks excellence in the discovery and dissemination of knowledge regarding the cause, prevention, detection and diagnosis, treatment, survivorship and health policy of cancer. This requires that all individuals affiliated with, or funded by, the American Cancer Society adhere to the highest standards of professional integrity. Volunteer grant reviewers for the American Cancer Society will also be held to the highest codes of conduct and integrity in performing their essential function of peer review.

The American Cancer Society provides grant funds for individuals at academic and other not-for-profit institutions to promote cancer-related training, research and patient care. This represents a contractual relationship with such institutions, and it is an accepted responsibility and obligation of those institutions to provide policies and procedures for their faculty, staff and students that address possible misconduct. Moreover, it is the responsibility and obligation of faculty, students and staff engaged in scientific research and training to be aware of policies and procedures for addressing possible misconduct at their institutions, and to follow those procedures in reporting possible misconduct.

While questions of the integrity of applicants, grantees, and reviewers are very infrequent, they do occur. It is the responsibility of the Scientific Directors managing the review process and portfolios of funded grants and the responsibility of the Senior Vice President for Extramural Research to ensure that all questions regarding research integrity are handled in a discreet, but thorough manner. The actions of the Program Directors and the Senior Vice President for Extramural Research must ensure the confidentiality and anonymity of the individual raising the question of misconduct; ensure the integrity of the American Cancer Society and its review processes; ensure the rights of the individual accused of misconduct; and ensure their own credibility and integrity.

Article I

Standards and Definitions:

1.1 Research Misconduct by Applicants or Grantees

The American Cancer Society uses the following definitions related to scientific misconduct outlined in the Federal Guidelines:

- Research misconduct is defined as fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.
- Research, as used herein, includes all basic, applied, and demonstration research in all fields of science, engineering, and mathematics. This includes, but is not limited to, research in economics, education, linguistics, medicine, biology, chemistry, psychology, natural sciences, social sciences, statistics, and research involving human subjects or animals.
- Fabrication is defined as making up data or results and recording or reporting them.
- Falsification is defined as manipulating research

materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record. • The research record is defined as the record of data or results that embody the facts resulting from scientific inquiry, and includes, but is not limited to, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, and journal articles. • Plagiarism is defined as the appropriation of another person's ideas, processes, results, or words without giving appropriate credit. • Research misconduct does not include honest error or differences of opinion. • Reported credentials and qualifications must be accurately represented in all documents submitted to the Society (e.g. degrees earned, years since degree earned).

1.2 Research Misconduct by Peer Review Committee Members

The American Cancer Society has adopted the following definitions of misconduct in review by members of a Peer Review Committee. Misconduct in review is defined as: • Review for an application for which there is a clear conflict of interest (COI) between the reviewer and applicant. See Section 1.5. • Failure to notify ACS personnel of actual, potential, perceived or potentially perceived conflicts of interest. • Any communication pertaining to review related materials between a member[s] of a peer review committee and an applicant, or the mentor of an applicant, in the case of applications with an element of training as part of the application. See Section 1.4 • Any communication of the unpublished content of a grant application by a member or members of a peer review committee with any individual who is not a permanent or ad hoc member of the peer review committee to which an application is assigned, or who has not been approved by the Program Director for such communication. • Any use of the unpublished content or concepts of a grant application in pursuit of scientific or career goals by a member of a peer review committee. • Any review of, or use of, the contents of a grant application by a member or members of a peer review committee who might have, or be perceived to have, a conflict of interest with the applicant or his/her mentor, in the case of applications with an element of training as part of the application.

1.3 Professional Misconduct by Applicants, Grantees and Reviewers due to Harassment and/or Sexual Harassment

The American Cancer Society is committed to providing an environment that is free of discrimination and will not tolerate unlawful harassment of persons by others, including supervisors, volunteers, coworkers, grantees, reviewers or contractors. The American Cancer Society has adopted the following definitions of harassment and sexual harassment as forms of professional misconduct in addition to those definitions provided in sections 1.1 and 1.2 above: • Harassment is unwelcomed conduct that is based on race, color, religion, ethnic or national origin, gender, age, disability, sexual orientation, gender identity, veteran status, caregiver status, and/or genetic information or any other factor that is a prohibited consideration under applicable law. Harassment becomes unlawful where (a) enduring the offensive conduct becomes a condition of continued employment, or (b) the conduct is severe or pervasive enough to create a work environment that a reasonable person would consider intimidating, hostile, or abusive. • Sexual harassment is a form of discrimination and is therefore prohibited. Sexual harassment includes, but is not limited to, unwelcome sexual advances, requests for sexual favors, and other verbal or physical contact of a sexual nature, when: o Submission to such conduct is either an explicit or implicit term or condition of employment (e.g., promotion, training, or overtime

assignments). o Submission to or rejection of the conduct is used as a basis for making employment decisions (e.g., hiring, promotion, or termination). o The conduct has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to list all those additional circumstances that may constitute sexual harassment, the following are some examples of conduct which, if unwelcome, may constitute sexual harassment depending upon the totality of the circumstances, including the severity of the conduct and its pervasiveness: • Unwelcome sexual advances – whether they involve physical touching or not; • Sexual epithets, jokes, written or oral references to sexual conduct, gossip regarding one's sex life; comments on an individual's body, comments about an individual's sexual activity, deficiencies, or prowess • Displaying or distributing sexually suggestive objects, pictures, cartoons • Unwelcome leering, whistling, brushing against the body, sexual gestures, suggestive or insulting comments • Inquiries into one's sexual experiences • Discussion of one's sexual activities

1.4 Confidentiality Standard for Reviewers

To preserve the integrity of the peer review process, all parties involved in the review process must adhere to the following practices regarding confidentiality and non-disclosure:

- Reviewers must not discuss applications reviewed with any individual not designated as a part of the review process; and especially not with applicants, or their mentors in the case of training grants, either before or after the peer review meetings.
- Any inquiries to a peer review panel member regarding an application from an applicant, PI, CoPIs, consultants or their mentor, to a member of a Peer Review Committee or ACS Council for Extramural Grants must be reported immediately to the Program Director.
- All materials related to the review process must be destroyed or given to the Program staff at the end of the review meeting.
- For purposes of this standard, materials related to the review process include, but are not limited to: paper, bound volumes, compact disks (CDs), flash drives, electronic files accessed via the internet, or oral presentations or discussions.

1.5 Conflict of Interest Standard for Reviewers

To preserve the integrity of the peer review process, all participants in the process must adhere to these principles and practices:

- Reviewers must not be an employer or employee of an applicant, and may not be employed by the same institution as an applicant within three years of the date of submission of an application
- Reviewers must not be a party to any agreement for future employment or other agreements or arrangements with an applicant or any person listed as key personnel on an application • Reviewers must not have served as mentors or collaborators of an applicant within 3 years of the date of an application
- Reviewers must not participate in the review of an application submitted by a standing member of a Peer Review Committee serving on the same review committee • Reviewers must not be under the health care of, or providing health care to, an applicant or any person listed as key personnel on an application
- Reviewers must not have received or have the potential to receive direct financial benefit from applicant or any person listed as key personnel on an application if the application was funded
- Reviewers must not be pursuing research projects which might be viewed as being in direct competition with applicants or their

collaborators and colleagues; nor have the potential to receive direct benefit from failure of the application to be funded • Reviewers must not have any cause of action against, any dispute with, any long-standing scientific or personal differences with, or any claim whatsoever against the applicant or any person listed as key personnel on an application

Articles II

Policies:

2.1 Policy Governing Misconduct by Applicants and Grantees

2.1.1 Scientific Misconduct by Applicants:

Any allegations of scientific misconduct must be brought to the immediate attention of the Program Director in charge of the Peer Review Committee that is responsible for reviewing the work in question. If possible, allegations of scientific misconduct on the part of an applicant in the submission of a grant proposal should be raised in advance of the review meeting. The Program Director will then bring the allegation to the attention of the Senior Vice President for Extramural Research at ACS. The Senior Vice President for Extramural Research will evaluate the allegation and make a determination on the misconduct issue and the appropriate next steps to be taken to engage in further investigation or action in accordance with Article III, section 3.1.1, “Procedure for Handling Allegations of Scientific Misconduct by Applicants.”

2.1.2 Scientific Misconduct by Grantees:

In instances where alleged scientific misconduct occurs after the awarding of a grant, such as in the publication of falsified data, the Program Director will bring the allegation to the attention of the Senior Vice President for Extramural Research at ACS. The Senior Vice President for Extramural Research will evaluate the allegation and make a determination of the appropriate steps to be taken to engage in further investigation or action as defined in Article III, section 3.1.2, “Procedure for Handling Allegations of Scientific Misconduct by Grantees.”

2.1.3 Professional Misconduct by Grantees: In instances where alleged professional misconduct occurs after the awarding of a grant, such as an allegation of sexual harassment by a principal investigator, the grantee should follow the reporting guidelines in Article III, section 3.1.3, “Procedure for Handling Allegations of Professional Misconduct by Grantees.”

2.2 Policy Governing Misconduct by Peer Review Committee Members

2.2.1 Confidentiality:

Confidentiality is at the heart of the peer review process and is imperative for objective evaluation and free expression in the review process. The applicant-reviewer relationship is a privileged alliance founded on the ethical rule of confidentiality. To maintain the essence and integrity of the peer review process, the Society and its appointed peer reviewers must ensure and be assured that the confidentiality of the applicant’s information, the contents of the grant application, and the proceedings of the review panel will be maintained. Such confidentiality adheres when a person discloses information to another with the understanding that the information will not be divulged to others without the consent of the party who disclosed the information, or as otherwise required by law. In the context of peer review, this rule upholds the

applicants' rights to have the information they submit, whether in proposal form or in communications, kept confidential. The rule also ensures that those involved in the review process maintain their obligation to keep confidential any information concerning an application. In fact, the very existence of a submission should not be revealed (or confirmed) to anyone other than those within the review process unless and until the application is funded. To this end, all contents, evaluation and discussion of applications shall be confined to Peer Review Committee (PRC) members and ACS staff personnel (Program Director, Senior Vice President for Extramural Research, Program staff) responsible for managing the review process of that PRC. For these purposes, reviewers include all standing and ad hoc reviewers of PRCs and members of the Council for Extramural Grants. In rare and specific instances, discussion of applications with, or in the presence of, non-committee members can occur after obtaining the written consent of the Program Director. Reviewers must not discuss reviews with applicants or their mentors in the case of training grants, either before or after the review meetings. Reviewers also must not communicate the contents of any grant applications with individuals not associated with the review process. Any materials related to the review process must be disposed of at the meeting, and all final critiques given to the Program Director.

If an allegation of a breach of reviewer confidentiality is brought forward, that allegation will be communicated to the Senior Vice President for Extramural Research who will determine if an investigation of that allegation is warranted. The Senior Vice President for Extramural Research will then follow the appropriate steps as defined in Article III, section 3.2 "Procedure for Handling Reviewer Misconduct and Conflicts of Interest."

2.2.2 Conflict of Interest:

An objective evaluation of grant proposals is essential to the peer review process. In achieving this goal, there must be no conflict of interest, apparent conflict of interest or pending future conflict of interest between any participant in the review process and the applicants or their collaborators and colleagues. In this setting, reviewers include standing and ad hoc Peer Review Committee (PRC) members and members of the ACS Council for Extramural Grants responsible for, and participating in, the review process. There are numerous bases for conflicts of interest, and these can include: employment, professional relationships, personal relationships, financial benefit, industry affiliation or other interests. The conflicts can be real or apparent. For Definitions of Conflict of Interest, refer to Section 1.5.

Reviewers may not make use of any of the contents of a grant for their own research purposes or those of their collaborators and colleagues. Reviewers must exercise proper due diligence in investigating and disclosing any potential conflict of interest that might exist between themselves and an applicant or the applicant's collaborators or mentors. The Conflict of Interest Statement attached as EXHIBIT A shall be submitted to the Society prior to the beginning of Peer Review. If an allegation of a reviewer conflict of interest is brought forward, that allegation will be communicated to the Senior Vice President for Extramural Research who will determine if an investigation of that allegation is warranted. The Senior Vice President for Extramural Research will then follow the appropriate steps as defined in Article III, section 3.2, "Procedure for Handling Reviewer Misconduct and Conflicts of Interest."

Article III

Procedures for Handling Conflicts of Interest and Allegations or Findings of Misconduct:

To ensure the integrity of the peer review process and the integrity of ACS-sponsored research, it is necessary that the procedures for dealing with allegations of misconduct be clearly understood by all reviewers and ACS personnel. Procedures for handling allegations of misconduct by applicants, grantees and reviewers are detailed in the following sections.

3.1 Procedures for Handling an Allegation of Scientific Misconduct by Applicants or Grantees

3.1.1 Procedure for Handling Allegations of Scientific Misconduct by Applicants:

In the event that an allegation of scientific misconduct by an applicant is brought forward to a Program Director or other ACS staff, all effort must be made to investigate the validity of the allegation while maintaining the confidentiality of the individual making the allegation, the anonymity of the person against whom the allegation is made, and the integrity of the review process. The Program Director must immediately inform the Senior Vice President for Extramural Research of the allegation and provide all relevant information regarding the allegation. It is the Senior Vice President's responsibility to evaluate the likelihood of scientific misconduct; and, if warranted, it is the Senior Vice President's responsibility to contact the appropriate institutional office at the applicant's institution regarding the allegation. The Senior Vice President for Extramural Research will then serve as the point of contact between the ACS and the institutional official[s] handling issues of scientific misconduct.

If determined to be appropriate, the Senior Vice President for Extramural Research will forward an allegation of scientific misconduct and all pertinent information to the Research Integrity Officer at the institution sponsoring the grant application in question or at which the alleged scientific misconduct was carried out. If there is not a Research Integrity Officer, the Dean of the School in question or its chief academic officer will be contacted. In the instance that the person[s] making the allegation does not contact the American Cancer Society but raises the allegation of scientific misconduct with the appropriate institutional official according to their established institutional procedures, it is the responsibility of the institution to contact the American Cancer Society regarding the allegation, any investigation of the allegation, and the outcome of that investigation. All such correspondence will be held in strict confidence and will not be made public by the American Cancer Society irrespective of the outcome of the investigation. The American Cancer Society assumes no responsibility in carrying out the investigation of scientific misconduct, or in determining an individual's innocence or guilt of the allegation of scientific misconduct. However, acceptance or nonacceptance of the findings of the institutional investigation is at the discretion of the Society, and additional clarification may be requested.

Allegations of scientific misconduct in a grant application may be made by individuals who are colleagues, trainees, or reviewers. In the instance that an allegation of scientific misconduct is made in reference to a grant application, the Senior Vice President for Extramural Research will contact the institutional official at the sponsoring research institution and seek to follow their established protocol for investigating such allegations. If an investigation is deemed necessary, it will be the responsibility of the sponsoring institution to carry out the investigation, to keep the ACS aware of the progress, and to report the outcome of the investigation to the Senior Vice

President for Extramural Research. The written report should include findings, actions taken, and any pending actions.

In fairness to the applicant, the review process must continue while the allegation of scientific misconduct undergoes assessment. Review may continue either in the standing review committee or under the By-pass to Council review mechanism. Under no circumstance should a reviewer, Program Director or ACS staff raise the issue of the allegation in a peer review meeting or meeting of ACS Council for Extramural Grants. If that were to occur, review of that application could not be completed without bias; and review of the application must therefore be discontinued immediately and deferred to ad hoc reviewers or the ACS Council for Extramural Grants. If a reviewer suspects scientific misconduct, which is discovered at the time of the meeting, it is appropriate to request the Chair of the PRC or Council take a "break" and discuss the issue privately with the Program Director. The Program Director will then take the proscribed administrative steps following the adjournment of the review meeting.

The ACS will complete the process of peer review of the application but will suspend any administrative action which would result in funding of the award in question until the resolution of the investigation. At the conclusion of the investigation, the ACS will require the Office of Research Integrity or comparable entity at the applicant's sponsoring institution to provide a written statement detailing the results of the investigation including any actions taken, or actions pending. Failure of the institution to carry out such an investigation in a timely manner or to provide written results of the investigation will result in the administrative disapproval of the application. If the applicant is absolved of any scientific misconduct, the ACS will reinstitute administrative action that can result in funding for the award if it was approved and is within the pay-line established by ACS Council for Extramural Grants. In the instance that scientific misconduct has occurred, the ACS will administratively inactivate the application. Also, in the case of a finding of scientific misconduct, the investigator may no longer be eligible to participate in ACS funded awards, either as principal investigator, coinvestigator, collaborator, mentor or consultant. The investigator also may not be eligible to serve in any capacity in reviewing ACS grant proposals.

3.1.2 Procedure for Handling Allegations of Scientific Misconduct by Grantees:

In the event that an allegation of scientific misconduct by a grantee is brought forward to a Program Director or other ACS staff, all effort must be made to investigate the validity of the allegation while maintaining the confidentiality of the individual making the allegation and the anonymity of the person against whom the allegation is made. The Program Director or ACS staff contacted about the alleged scientific misconduct must immediately inform the Senior Vice President for Extramural Research of the allegation and provide all relevant information regarding the allegation. It is the Senior Vice President's responsibility to evaluate the likelihood of scientific misconduct; and, if warranted, it is the Senior Vice President for Extramural Research's responsibility to contact the appropriate institutional office at the applicant's institution regarding the allegation. The Senior Vice President for Extramural Research will then serve as the point of contact between the ACS and the institutional official[s] handling issues of scientific misconduct.

If determined to be appropriate, the Senior Vice President for Extramural Research will forward an allegation of scientific misconduct and all pertinent information to the Research Integrity

Officer at the institution sponsoring the grant in question or at which the alleged scientific misconduct was carried out. If there is not a Research Integrity Officer, the Dean of the School in question or its chief academic officer will be contacted. In the instance that the person[s] making the allegation does not contact the American Cancer Society but raises the allegation of scientific misconduct with the appropriate institutional official according to their established institutional procedures, it is the responsibility of the institution to contact the American Cancer Society regarding the allegation, any investigation of the allegation, and the outcome of that investigation. All such correspondence will be held in strict confidence and will not be made public by the American Cancer Society irrespective of the outcome of the investigation. The American Cancer Society assumes no responsibility in carrying out the investigation of scientific misconduct, or in determining an individual's innocence or guilt of the allegation of scientific misconduct. However, failure of the institution to immediately notify ACS of an allegation and/or investigation of scientific misconduct, or to carry out an investigation in a timely manner, or to provide written results to include findings, action taken, or any pending actions of the investigation, is in non-conformance with the terms and obligations of the grant and may result in the suspension of ACS funds for all grants awarded at the institution, to be decided by ACS in its sole discretion. Acceptance or non-acceptance of the findings of the institutional investigation is at the discretion of the American Cancer Society, and additional clarification may be requested.

If the investigator has an active ACS award, funding of that award will be suspended until the allegation has either been confirmed or be proven to be erroneous. If the allegation is proven not to have merit, the award may be reinstated by ACS at the date of notification of those findings by the sponsoring institution. If the allegation of scientific misconduct is confirmed, the award will be terminated and any residual funds, as of the date of notification of the sponsoring institution of the allegation, must be returned to the ACS. In the case of a finding of scientific misconduct, the investigator may no longer be eligible to participate in ACS funded awards, either as principal investigator, co-investigator, collaborator, mentor, or consultant. The investigator may also not be eligible to serve in any capacity in reviewing ACS grant proposals. The publication of data serves to further the interests of the scientific pursuit, and specifically in the case of the ACS, the pursuit of eliminating the burden of cancer. Therefore, it is incumbent on both the ACS and the scientific community to ensure that any instances of misrepresentation of findings in a scientific study are apparent to the scientific community. To that end, a finding of falsification or misrepresentation of data in a published forum must be reported to the editor-in-chief of the journal in which such data is reported. It is the responsibility of the Senior Vice President for Extramural Research to coordinate such notification with the appropriate sponsoring institutional official according to their established policies and in conjunction with the policies of the journal. If the sponsoring institution does not have a policy regarding notification of the journal, then the Senior Vice President for Extramural Research will notify the editor-in chief of the journal according to the journal's established policies.

In the case of findings of falsification or misrepresentation of published data supported by ACS funds, any active grant[s] held by the responsible individual will be terminated and that individual may no longer be eligible for ACS funding via any mechanism as a principal investigator, co-investigator, collaborator, mentor, or consultant. That individual may also not be eligible to participate in ACS review in any capacity.

3.1.3 Procedure for Handling Professional Misconduct by Grantees:

For purposes of this subsection, the following definitions apply: • Finding/Determination: (1) the final disposition of a matter under organizational policies and processes, to include the exhaustion of permissible appeals; or (2) a conviction of a sexual offense in a criminal court of law. • Administrative leave/Administrative action: any temporary/interim suspension or permanent removal of an individual, or any administrative action imposed on an individual by the grantee under organizational policies or codes of conduct, statutes, regulations, or executive orders, relating to activities, including but not limited to, teaching, advising, mentoring, research, management/administrative duties, or presence on campus.

The grantee's institution is required to notify ACS (1) of any finding/determination regarding the principal investigator (PI) or co-PI that demonstrates a violation of grantee policies or codes of conduct, statutes, regulations, or executive orders relating to sexual harassment, other forms of harassment, sexual assault, or other professional misconduct; and/or (2) if the PI or co-PI is placed on administrative leave or if any administrative action has been imposed on the PI or any co-PI by the awardee relating to any finding/determination or an investigation of an alleged violation of grantee policies or codes of conduct, statutes, regulations, or executive orders relating to sexual harassment, other forms of harassment, sexual assault, or other professional misconduct. Such notification must be submitted to the Senior Vice President for Extramural Research within ten days of (1) the finding/determination, (2) the date of the placement of the PI or co-PI on administrative leave, or (3) the date of the imposition of an administrative action, whichever is sooner. Each notification must include the following information: • ACS grant number; • Name of individual being reported; • Type of notification (choose one) o Finding/determination that the reported individual has been found to have violated grantee policies or codes of conduct, statutes, regulations, or executive orders relating to sexual harassment, other forms of harassment, or sexual assault; or o Placement by the grantee of the reported individual on administrative leave or the imposition of any administrative action on the individual by the grantee relating to any finding/determination or an investigation of an alleged violation of awardee policies or codes of conduct, statutes, regulations, or executive orders relating to sexual harassment, other forms of harassment, or sexual assault; • Description of the finding/determination and action(s) taken, if any; and • Reason(s) for, and conditions of, placement of the individual on administrative leave or imposition of administrative action.

If (1) the institution notifies ACS of a finding of professional misconduct by a grantee, or (2) the institution notifies ACS that administrative action has been taken against a grantee because of a finding/determination that the grantee committed professional misconduct, ACS will consider the policy violation findings on a case-by-case basis. ACS may respond to a misconduct finding by, but not limited to, substituting or removing principal investigators or co-principal investigators, reducing award funding, and—where neither of those options are available or adequate—suspending or terminating awards. If the award is terminated, any residual funds, as of the date of notification, must be returned to ACS. The grantee may no longer be eligible to participate in ACS funded awards, either as principal investigator, co-investigator, collaborator, mentor, or consultant. The grantee may also not be eligible to serve in any capacity in reviewing ACS grant proposals.

If the institution notifies ACS of administrative action taken against a grantee pending an investigation of an allegation of professional misconduct and the investigator has an active ACS award, funding of that award will be suspended until the allegation has either been confirmed or determined to be erroneous. If the allegation is determined not to have merit, the award may be reinstated by ACS at the date of notification of those findings by the sponsoring institution. If the allegation of professional misconduct is confirmed, ACS will consider the policy violation findings on a case-by-case basis. If the award is terminated, any residual funds, as of the date of notification, must be returned to the ACS. In the case of a finding of professional misconduct, the grantee may no longer be eligible to participate in ACS funded awards, either as principal investigator, co-investigator, collaborator, mentor, or consultant. The grantee may also not be eligible to serve in any capacity in reviewing ACS grant proposals.

Institutions are strongly encouraged to conduct a thorough review of these guidelines to determine whether these guidelines necessitate any changes to the institution's policies and procedures. Institutions should likewise ensure that, in carrying out their investigating, disciplinary, and reporting obligations under these guidelines, they are at all times in compliance with state and federal laws, regulations, and guidelines applicable to the institution.

3.2 Procedure for Handling Reviewer Misconduct and Conflicts of Interest

In the event that an allegation of reviewer misconduct, such as failure to acknowledge a conflict of interest, is brought forward to a Program Director or other ACS staff, all effort must be made to investigate the validity of the allegation while maintaining the confidentiality of the individual making the allegation, the anonymity of the person against whom the allegation is made, and the integrity of the review process. The Program Director or other ACS staff contacted regarding the alleged misconduct must immediately inform the Senior Vice President for Extramural Research of the allegation, and provide all relevant information regarding the allegation. It is the Senior Vice President for Extramural Research's responsibility to evaluate the likelihood of reviewer conflict of interest or misconduct; and, if warranted, it is the Senior Vice President for Extramural Research's responsibility to handle the investigation internally or to inform the appropriate institutional office at the reviewer's institution about the allegation if aspects of the reviewer misconduct violate any of the tenets of professional behavior established by that institution. The Senior Vice President for Extramural Research will then serve as the point of contact between the ACS and the institutional official handling issues of reviewer misconduct.

Some elements of reviewer misconduct represent conduct that will only have relevance for the appropriateness of the reviewer's role as a member of a peer review committee. For instance, if there is inappropriate communication between reviewer and applicant or an applicant's mentor or colleagues. In a case of this type, all elements of the investigation of the reviewer misconduct will be handled by ACS personnel at the discretion of the Senior Vice President for Extramural Research. In cases where a reviewer does not retain the confidentiality of the applicant's information or the content of his or her application, and makes that information available to a third party, it will be at the discretion of the Senior Vice President for Extramural Research to handle the issue internally at ACS or contact the Office of Research Integrity at the reviewer's institution, based upon an initial assessment of whether such conduct violates the rules of conduct established by that institution. For instance, if there is communication of the contents of a grant proposal by a reviewer to a competitor in the same field as the applicant, or if the

reviewer makes use of findings or ideas in an application to further his or her own research interests. In the instance of such an allegation, the American Cancer Society assumes no responsibility for carrying out the investigation of scientific misconduct, or in determining an individual's innocence or guilt of the allegation of misconduct. It is the institution's responsibility to handle the misconduct according to their established procedures, and to submit to the Society a written report that includes findings, actions taken, and any pending actions. However, acceptance or non-acceptance of the findings of the institutional investigation is at the discretion of the Society, and additional clarification may be requested. In any instance of a finding of reviewer misconduct, that individual may no longer be eligible to serve in any capacity in reviewing ACS grant proposals and may be barred from receiving any ACS grant funds.

References:

The American Cancer Society Confidentiality, Non-Disclosure Rules and Conflict of Interest: Information for Reviewers of Grant Applications, Version 6/3/2005.

“Confidentiality in Peer Review” (section 3.7.1). Pugh MB, ed. American Medical Association Manual of Style: a guide for authors and editors. 9th ed. Baltimore, MD: Williams & Wilkins; 1997:136-137.

Federal Register, Vol. 65, No. 235, pg. 76260-76264.

APPENDIX B: INSTRUCTIONS FOR SUBMITTING DELIVERABLES

GRANT ACTIVATION FORMS ANNUAL PROGRESS/FINAL REPORTS TRANSFER REQUEST CHANGE OF INSTITUTION CHANGE OF TERM EXTENSION OF TERM GRANT CANCELLATION CHANGE OF PRINCIPAL INVESTIGATOR REPORTS OF EXPENDITURES

The American Cancer Society subscribes to the Altum proposalCENTRAL **Post Award Management System** to facilitate management ACS grants. The system is designed to collect and store grant information from grantees. Grantees are asked to keep their proposalCENTRAL profile current for the duration of the grant.

The site will house all reports, requests and correspondence pertaining to a grant and is accessible to both ACS program staff and grantees. Grantees may provide access to others at their institution (e.g. grants officers) using the instructions provided below.

All awardees of an ACS grant will need to upload deliverables, and then send an email (correspondence) to the Scientific Director/Program Manager informing the program office of the submitted deliverables. The first deliverable we will be collecting through the **Post Award Management System** is the “Activation Form.” For the Activation Form only, please also email April Jones at april.jones@cancer.org in the Research Business office notifying her that you have uploaded your Grant Activation Form.

Uploading an Award Deliverable

- Log onto <https://proposalcentral.com/>
- **PI must enter their proposalCentral username and password in “Applicant Login” to access their award detail information**
- Click on the Awarded link or all Proposal link
- In the Status column, click on the Award Details link
- On the Award Details screen, click on the Deliverables link at the bottom of the screen

The schedule of deliverables due for the award is shown chronologically.

- Click Save to upload the deliverable. You can replace the uploaded document with another document by clicking Browse again, selecting a different document from your computer files and click the Save (Adding description of deliverable is optional)
- Click Close

Send Email (Correspondence) to an ACS Administrator

- To send correspondence to Scientific Director at the ACS, click the “Correspondence” link from the Award Details screen
- From this page, you can see any correspondence that has already been sent by clicking on the Blue link in the Message column
- Use the Respond link to respond directly to a message you have received
- To send a new message, click “Send Correspondence to Scientific Director” at the top of the page
- Select the administrator(s) who should receive the correspondence email
- Enter a subject and text for the correspondence in the spaces provided
- Click the “Send Email” button to send the email(s) to the selected administrator

Once an application is awarded it moves from proposalCENTRAL into the Post Award Management System. People who previously had access to your application in proposalCENTRAL will not have access to your awarded grant in the Post Award Management System. You may need to allow access to different users than those listed in proposalCENTRAL to enable them to upload various reports on your behalf.

To allow to another user access to your award and to submit deliverable

- Person(s) must be a registered user on proposalCENTRAL. If they are not, ask them to register as a new user at: <https://proposalcentral.com/>
- Once user is registered, from Award Detail screen click Contacts and User Access link
- Click on Manage User Access to Award at the top of the screen
- Enter and confirm email address of person
- Click on Add button
- Change the Permissions role from View to Administrator
- Click on Save button to activate access for new person

To upload other documents such as Publications, CV, etc.:

- Click the "Add Deliverable" link on the Award Deliverable screen. Select "Other" from the drop-down menu next to "Deliverable Type" from the pop-up screen
- Type in the "Deliverable Description" (i.e. Publications; CV; etc.)
- Click "Browse" to upload their document
- Click "Save"

Additional information and help can be obtained through proposalCENTRAL customer support desk:

By phone: 1-800-875-2562 toll free

By email: pcsupport@altum.com