Alcohol and Substance Abuse Research Program (2019)

Award	Eligibility	Key Elements	Funding ($)
RFA #4a Planning Grants	Independent investigators at all academic levels	Small-cost and short-duration planning grant awarded to investigators concerning a specific compound or combination of compounds. Designed to determine the clinical development plan (CDP) and associated studies needed to advance the compound to FDA approval for ASUD treatment. The protocol for the first study will be developed as part of the planning grant and will be considered for funding and implementation by the PASA Consortium. Preference will be given to compounds that have potential value to a pharmaceutical company to gain support for final development by the company. Participation in the grant by a company will be highly valued.	Maximum total costs of $150,000. Maximum period of performance is 9-12 months.
RFA #4b Full study implementation awards	Independent investigators at all academic levels	Full study implementation awards for proof-of-principle basic research to determine which compounds are most appropriate for human research trials. Discovery of new medications for ASUD and PTSD can greatly benefit from animal models of these disorders. Medications can reduce the aberrant behaviors in these models of PTSD and ASUD and potential dosages of these medications can be estimated for human studies.	Maximum total costs of $295,000. Maximum period of performance is 18 months.

https://cdmrp.army.mil/asadrp/default

Amyotrophic Lateral Sclerosis Research Program (2021)

The mission of the ALSRP is to fund innovative pre-clinical research to develop new treatments for ALS for the benefit of Service members, Veterans, and the general public. The following mechanisms are planned for release:

Award	Eligibility	Key Elements	Funding ($)
Therapeutic Development Award	Independent investigators at all academic levels	• Supports secondary preclinical validation and IND-enabling studies of therapeutics for ALS. • Preliminary data are required, including efficacy of a lead molecule/class of compounds in at least one ALS-relevant model system. • Biomarker development and/or characterization, in parallel to the main therapeutic effort, is a critical component of the TDA.	Maximum funding of $1,000,000 for direct costs plus indirect costs Maximum period of performance is 3 years
Therapeutic Idea Award	Independent investigators at all academic levels	• Supports hypothesis-driven preclinical therapeutic development. • Projects focusing primarily on investigating ALS pathophysiology are outside the scope of this award mechanism. • Preliminary data are not required. • Early Career Investigators are encouraged to apply. • Biomarker Option: Applications that include development of biomarkers in parallel to the main therapeutic effort, and that meet criteria outlined in the Funding Opportunity Announcement, will qualify for a higher level of funding	Maximum funding of $500,000 for direct costs plus indirect costs Maximum funding of $600,000 for direct costs plus indirect costs if applying for the Therapeutic Relevant Biomarker Option Maximum period of performance is 2 years
Clinical Development Award	Independent investigators at all academic levels (or equivalent)	• Supports correlative clinical research and leveraging of human-based ALS resources. • Types of efforts that will be supported include: ○ Using human subject-based resources to better define subtypes, predict therapeutic response, or assess prognosis;	Maximum funding of $300,000 for direct costs plus indirect costs Maximum period of performance is 2 years

		○ Correlating clinical trial-related biosamples, imaging, or epidemiological data with clinical outcomes; ○ Adding a biomarker companion or observational aim to an anticipated/ongoing clinical trial; ○ Observational studies to optimize components of current ALS clinical care such as respiratory care strategies, use of approved devices, or specific symptom management strategies and assistive technologies. • Early Career Investigators and/or Early Career Physician Scientists are encouraged to apply.	
NEW! Therapeutic/Biomarker Pilot Trial Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• Supports exploratory clinical trials to demonstrate feasibility or inform the design of more advanced trials for the treatment or management of ALS. • Must support a clinical trial and may not be used for preclinical research studies. • Preliminary data are required. • Biomarkers must be incorporated into the trial design. Biomarkers may measure target engagement, drug pharmacodynamics, and/or be predictive/cohort-selective.	Maximum funding of $2,000,000 for direct costs plus indirect costs. Maximum period of performance is 4 years.

http://cdmrp.army.mil/alsrp/default

Autism Research Program (2021)

The Autism Research Program focuses on improving the lives of those living with ASD by funding innovative, and highly impactful research. Through the program's areas of interest, the Autism Research Program focuses on ways to improve diagnosis, treatment, and studying psychosocial factors for affecting key lifetime transitions to independence and a better life for those with autism and their families.

Award	Eligibility	Key Elements	Funding
Clinical Trial Award	Investigators at or above the level of Associate Professor (or equivalent), or **Nested Early-Career Investigator Option:** Investigators at or above the	• Supports research with the potential to have a major impact on the treatment and/or management of ASD.	• Maximum funding of $1,800,000 for direct costs (plus indirect costs)

	level of Associate Professor (or equivalent) may collaborate on a single application with a young investigator (at the level of postdoctoral fellow up to early-career independent faculty) who meets the following criteria at the application submission deadline date: • Must be in a current postdoctoral training position or have completed postdoctoral training by the application deadline • Is no more than 7 years from the receipt of a terminal degree • Has the freedom to commit at least 50% time to the project	• Preliminary data relevant to the proposed clinical trial are required. • Pre-application is required; application submission is by invitation only. • **Nested Early-Career Investigator Option**: Supports the development of young investigators pursuing or wishing to pursue a career in ASD clinical trial research.	• Maximum period of performance is 4 years ***Nested Early-Career Investigator Option:*** • Maximum funding of $2,100,000 for direct costs (plus indirect costs) • Maximum period of performance is 4 years
Clinical Translational Award	Investigators at or above the level of Assistant Professor (or equivalent)	• Supports early-phase, proof-of-principle clinical trials with the potential to have a major impact on the treatment and/or management of autism spectrum disorder (ASD). • Preliminary data relevant to the proposed project are required. • Pre-application is required; application submission is by invitation only.	• Maximum funding of $600,000 for direct costs (plus indirect costs) • Maximum period of performance is 3 years

Idea Development Award	Investigators at or above the level of Assistant Professor (or equivalent), **or** **Multiple PI Option:** Up to two investigators may collaborate on a single application, each of whom will be recognized as a Principal Investigator and receive a separate award.	• Supports the development of innovative, high-impact ideas that advance the understanding of ASD and ultimately lead to improved outcomes. • Preliminary data relevant to the proposed project are required. • Pre-application is required; application submission is by invitation only. • Clinical trials or applications including a clinical trial aim are not allowed.	• Maximum funding of $550,000 for direct costs (plus indirect costs) • Maximum period of performance is 3 years

Career Development Award	Independent investigators at or below the level of Assistant Professor (or equivalent) or
	
	Established independent investigators in an area other than ASD at or above the level of Assistant Professor (or equivalent) and seeking to transition to a career in ASD, thereby bringing their expertise to the field.
	
	Investigators must not have received a Career Development Award (or equivalent) previously from any program within the CDMRP.
	
	Investigators must not have received more than $300,000 in total direct costs for previous or concurrent ASD research as a Principal Investigator of one or more federally or privately
		• Supports early-career, independent investigators and/or the transition of established investigators from other research fields to conduct:
		  ○ Innovative, high-impact ideas or
		  ○ Early-phase, proof-of-principle clinical trials with the potential to have a major impact on ASD.
		• Preliminary data relevant to the proposed project are required.
		• Racial, ethnic, and gender minorities are encouraged to apply.
			• Maximum funding of $500,000 for direct costs (plus indirect costs).
			• Maximum period of performance is 3 years.

	funded, non-mentored, peer-reviewed grants.	• Pre-application is required; application submission is by invitation only.	

http://cdmrp.army.mil/arp/default

Bone Marrow Failure Research Program (2020)

Award	Eligibility	Key Elements	Funding ($)
Idea Development Award	***Established Investigators:*** Independent investigators at or above the level of Assistant Professor (or equivalent) and 10 years or more from first faculty appointment ***or*** ***Early-Career Investigators:*** Investigators at the level of Assistant Professor (or equivalent) and less than 10 years from first faculty appointment.	• Preproposal is required; full application submission is by invitation only. • Supports innovative ideas and high-impact approaches based on scientifically sound evidence to move toward the vision to understand and cure bone marrow failure (BMF). • Strong BMF research team. • Research project should include well-formulated, testable hypothesis based on strong scientific rationale and a well-developed and articulated research approach. • Translational potential should be considered and described. • May include relevant preliminary data • Clinical trials will not be supported.	Maximum funding of **$325,000** in direct costs (plus indirect costs) Period of performance not to exceed **2** years

http://cdmrp.army.mil/bmfrp/default

Breast Cancer Research Program (2021)

Applications submitted to the FY21 BCRP must address one or more of the following overarching challenges:

- Prevent breast cancer (primary prevention)
- Identify determinants of breast cancer initiation, risk, or susceptibility
- Distinguish deadly from non-deadly breast cancers
- Conquer the problems of overdiagnosis and overtreatment
- Identify what drives breast cancer growth; determine how to stop it
- Identify why some breast cancers become metastatic
- Determine why/how breast cancer cells lie dormant for years and then re-emerge; determine how to prevent lethal recurrence
- Revolutionize treatment regimens by replacing them with ones that are more effective, less toxic, and impact survival
- Eliminate the mortality associated with metastatic breast cancer

Award	Eligibility	Key Elements	Funding
Breakthrough Award	• Investigators at all academic levels (or equivalent) • Applications from postdoctoral fellows are encouraged to apply under Funding Levels 1 and 2.	• Supports promising research that has high potential to lead to or make breakthroughs in breast cancer. • Potential impact of the research may be near-term or long-term, but it must move beyond a minor advancement and have the potential to lead to a new approach that is fundamentally better than interventions already approved or in clinical development. • Partnering PI Option allows two Principal Investigators (PIs), termed Initiating and Partnering PIs, to collaborate on a single application. • Different funding levels, based on the scope of research, are available. It is the responsibility of the PI to select the funding level that is most appropriate for the research proposed. The funding level should be selected based on the scope of the research project, rather than the amount of the budget Further information in regards to funding levels can be found here https://cdmrp.army.mil/pubs/press/2021/21bcrppreann	Further information about Funding for each level can be found here https://cdmrp.army.mil/pubs/press/2021/21bcrppreann

Era of Hope Scholar Award	Independent, non-mentored investigators within 6 years of their last training position (e.g., postdoctoral fellowship, medical residency, clinical fellowship) as of the application submission deadline	• Supports exceptionally talented, early-career scientists who have demonstrated that they are the "best and brightest" in their fields through extraordinary creativity, vision, innovation, and productivity. • PIs should articulate a vision that challenges current dogma and demonstrates an ability to look beyond tradition and convention. • PIs must demonstrate experience in forming effective partnerships and collaborations and exhibit strong potential for future leadership in breast cancer. • PIs are required to include two or more breast cancer advocates on their research team. • Submission of a Letter of Intent is required prior to full application submission.	Maximum funding of **$3M** for direct costs (plus indirect costs) Maximum period of performance is **4** years
Innovator Award	Associate Professor or above (or equivalent)	• Supports visionary individuals who have demonstrated exceptional creativity, innovative work, and paradigm-shifting leadership in any field. • Provides opportunity to pursue novel, visionary, high-risk ideas that will accelerate progress toward ending breast cancer. • PIs must include two or more breast cancer advocates on their research team. • Submission of a preproposal is required; application submission is by invitation only.	Maximum funding of **$7M** for direct costs (plus indirect costs) Maximum period of performance is **4** years
Transformative Breast Cancer Consortium Award	Independent investigators at all academic levels (or equivalent)	• Supports collaborations and ideas that will transform or improve the lives of individuals with, and/or at risk for, breast cancer and will significantly accelerate progress toward ending breast cancer. • The proposed consortium's work must pursue innovative, high-risk/high-reward research that has the potential to change existing paradigms, or develop new paradigms. • Requires synergistic, highly integrated, multidisciplinary, and multi-institutional research teams of leading scientists, clinicians, and consumer advocates who will be assembled into a consortium to address a major problem in a way that could not be accomplished by a single investigator or group.	Maximum funding of $25 million (M) for direct costs (plus indirect costs). Maximum period of performance is 4 years.

		• The award mechanism is structured with a Consortium Director and at least three, but not more than four, Team Principal Investigators (PIs) representing at least two institutions. • The consortium must include at least one breast cancer consumer advocate per team. • May include clinical trials up to and including Phase I or equivalent; however, clinical trials are not required, and the primary thrust of the application should not be a clinical trial. • Submission of a preproposal is required; application submission is by invitation only. Preference will be given to applications that include one or more of the following: • Different disciplines that come together with one overarching plan to address ending breast cancer with an ecologic approach. An ecologic approach is one that brings together the different perspectives that affect the complexity of breast cancer and their interdependence, or looks at all aspects of the disease and brings together these different perspectives. • Research that includes truly innovative and brand new paradigms in breast cancer that will address vital issues in a unique way. The issues may be one of the FY21 BCRP Overarching Challenges, the intersection of multiple Overarching Challenges, or with justification, may be a different issue that meets the intent of the award mechanism and addresses the mission of ending breast cancer. • A plan for a deep, definitive dive into one of the FY21 BCRP Overarching Challenges or a fundamental issue that has not yet been asked or answered in a manner that has not yet been attempted.	

http://cdmrp.army.mil/bcrp/default

Chronic Pain Management Research Program (2020)

Applications submitted to the FY20 CPMRP award mechanisms must address one or more of the FY20 CPMRP Focus Areas.

- Investigator-Initiated Research Award
  - Chronification of pain (i.e., the acute-to-chronic pain transition)
  - Development of novel non-μ-opioid receptor targeted therapies for the treatment of chronic pain
- Translational Research Award
  - Comparative effectiveness (for evidence-based, efficacious interventions to manage chronic pain)
  - Implementation science (for evidence-based, efficacious interventions to manage chronic pain)

Award	Eligibility	Key Elements	Funding
Investigator-Initiated Research Award	Investigators at or above the level of Assistant Professor (or equivalent).	• Emphasis on innovative and impactful research. • Must include preliminary and/or published data or clinical observations that originated from the research team that support the rationale for the proposed study. • Should be relevant to active duty Service members, Veterans, military beneficiaries, and/or the American public. • Multidisciplinary collaborations are encouraged. • Clinical trials are not allowed.	Maximum funding of $900,000 for direct costs (plus indirect costs). Maximum period of performance is 4 years.
Translational Research Award	Investigators at or above the level of Assistant Professor (or equivalent).	• Supports acceleration of evidence-based ideas and research into clinical applications (e.g., healthcare products, technologies, practice guidelines, models of care). • Must include preliminary and/or published data collected by the research team that support the rationale for the proposed study. • May include studies using prospective human subject enrollment or retrospective data analysis; limited clinical trials are allowed. • Effectiveness-implementation hybrid type 2 and type 3 studies are encouraged. • Animal studies are not allowed.	Maximum funding of $1,400,000 for direct costs (plus indirect costs). Maximum period of performance is 4 years.

https://cdmrp.army.mil/cpmrp/default

Combat Readiness Medical Research Program (2020)

Applications submitted to the FY20 CRRP must address at least one of the following Focus Areas:

- Multiple-use scalable wound-care solutions that can address prevention of bleeding and infection, delivery of therapeutics, and promotion of healing spanning acute through chronic care
- Repair and/or restoration of combat-related genitourinary organ and tissue damage
- Solutions for assessment of mild traumatic brain injury in deployed and far-forward settings to include portable devices
- Research and development of freeze-dried plasma and platelets to address hemorrhage and resuscitation
- Solutions to enhance Warfighter readiness in battlefield and austere environments including the prevention and treatment of:
    - Gastrointestinal illness such as Enterotoxigenic Escherichia coli diarrheal disease and inflammatory bowel disease
    - Sleep disorders
    - Myalgic encephalomyelitis/chronic fatigue syndrome
    - Infectious diseases
    - Enhanced delivery and utilization of telemedicine platforms

Award	Eligibility	Key Elements	Funding
Rapid Development and Translational Research Award	Extramural applicants only. Independent investigators at all academic levels (or equivalent).	• Submission of a preproposal is required; application submission is by invitation only. • Supports research that will accelerate the movement of promising ideas into clinical applications, including healthcare products, technologies, and/or practice guidelines. • Preclinical research, including animal studies, that is already supported by substantial preliminary or published data and strongly validates clinical translation is appropriate. • Research involving human subjects and human anatomical substances is permitted; however, clinical trials are not allowed.	Maximum funding of $2,000,000 for total costs (to include direct and indirect costs). Maximum period of performance is 2 years.

https://cdmrp.army.mil/crrp/default

Defence Medical Research and Development Program (2021)

Award	Eligibility	Key Elements	Funding ($)
En Route Care Award	Independent investigators at all academic levels (or equivalent)	• Supports the development of highly innovative materiel and knowledge products to drive critical combat casualty care capabilities to the Warfighter in multidomain operations, highly mobile, austere, and extreme environments where evacuation capabilities may be significantly delayed or unavailable. • Applications must address at least one of the FY21 ERCA Focus Areas. • Proposed research must be relevant to Service members. • Pre-application submission is required; application submission is by invitation only. • Clinical trials are not allowed	The maximum allowable funding for the entire period of performance is $1,400,000 for total costs (direct and indirect). The maximum period of performance is 4 years.

https://cdmrp.army.mil/dmrdp/default

Duchenne Muscular Dystrophy Research Program (2020)

Award	Eligibility	Key Elements	Funding ($)
Idea Development Award	Independent investigators at all academic levels (or equivalent).	• Supports the development of innovative, high-impact ideas that advance the understanding of Duchenne muscular dystrophy (DMD) and ultimately lead to improved outcomes. • Must address opportunities and challenges in the development of safe and effective macromolecular and cellular therapies that address primary pathology of DMD. Eligible therapeutic strategies include: gene therapy, genome editing, oligonucleotide therapies, exon skipping, protein therapeutics, and cell therapies. Therapies that will be efficacious across the life-span, particularly in adolescents and adults are encouraged. • Preliminary data required. • Clinical trials are not allowed.	Maximum funding of $350,000 in total costs. Maximum period of performance is 2 years.
Translational Research Partnership Award	Investigators at or above the level of Assistant Professor (or equivalent).	• Supports the development of translational research collaborations between two independent investigators to address a critical problem or question in DMD and to accelerate the movement of promising ideas into clinical application. • Partnerships where one partner in the collaboration is a research scientist and the other is a clinician are *strongly encouraged*.	Maximum combined funding of $1,200,000 for direct costs (plus indirect costs).

		• *Must* address one of the FY20 Translational Research Partnership Award Focus Areas • **Preliminary data required.** • **Clinical trials are allowed.**	Maximum period of performance is 3 years.

http://cdmrp.army.mil/dmdrp/default

Epilepsy Research Program (2021)

Applications submitted to the FY21 ERP should address one or more of the following Focus Areas. An application that proposes research outside of the FY21 Focus Areas is acceptable, as long as the applicant provides a strong rationale. The Focus Areas will be mechanism-specific.

Innovative Research: Tools intended to better inform or improve upon how PTE research can be performed:

- Hardware and/or software platforms that will improve seizure detection, characterization, or diagnosis
- Bioinformatics strategies, to include machine learning, that will improve access, annotation, curation, and visualization of large and novel datasets from single or multiple sources
- Development of new models or better characterization of existing etiologically relevant models for PTE
- Characterization of the circuits involved in PTE
- Validate targets of post-traumatic epileptogenesis or established PTE

Markers and Mechanisms: Identifying markers or mechanisms via preclinical models that address PTE, which may include the following:

- Biomarkers (acute and chronic)
- Treatment
- Prevention
- Comorbidity

Epidemiology: Epidemiological characterization of PTE following traumatic brain injury, which may include the following:

- Risk factors such as demographics, genetics, anatomy, pathology, or type of injury
- Outcomes including latency to epilepsy, comorbidities, and mortality
- Pre-existing conditions including psychological and psychiatric risk factors

- Treatment and healthcare outcomes research
- Differentiation of PTE and psychogenic non-epileptic seizures

Longitudinal Studies: Studies of the evolution of PTE, which may include the following:

- Seizure frequency and semiology
- Demographics, genetics, anatomy, pathology, or type of injury
- Comorbidities (e.g., depression, functional deficits, sleep disorders, major illness)
- Latency between type of injury and PTE
- Mortality
- Treatment outcome and healthcare outcome research

Quality of Life: Understanding and improving the quality of life for individuals with PTE and their caregivers by addressing the following:

- Psychosocial factors
- Neuropsychological dysfunction (cognition and memory)
- Behavioral health (anxiety, depression, post-traumatic stress disorder, impulsivity)
- Reducing stigma
- Activities of daily living
- Reducing healthcare disparities (adjunct programs, support groups, access to care)
- Sleep disorders
- Medication side effects
- Treatment and healthcare outcomes research

Award	Eligibility	Key Elements	Funding ($)
Research Partnership Award	The Principal Investigator must be an independent investigator at or above the level of	**Intent:** To create an avenue for collaborative research partnerships between/among investigators to address a research problem or question in a manner that would be unachievable through separate efforts. • Level I is intended to support preclinical or pre-validation research.	Level I: • Maximum funding of $1.3M for total costs.

	Assistant Professor (or equivalent).	• Level II is intended to support research requiring access to a patient cohort for a prospective study. Applications must include clearly stated plans for interactions between the partners. The plans must include communication, coordination of research progress and results, and data sharing between all investigators and organizations participating in the project. The following Focus Areas are open to both Levels I and II: • Markers and Mechanisms (Level I Only) • Epidemiology (Level I Only) • Longitudinal Studies (Level II Only) Preliminary data are required. Clinical pharmacologic trials are specifically discouraged.	• Maximum period of performance is 3 years. • Indirect costs may be proposed in accordance with the institution's rate agreement. Level II: • Maximum funding of $3.1M in total costs. • Maximum period of performance is 4 years. • Indirect costs may be proposed in accordance with the institution's rate agreement.
Idea Development Award	**Level I:** intended to support early-career investigators ranging from the post-doctoral level (e.g. research associate, fellows, residents or equivalent) to within 3 years of their first independent faculty position. (mentor required). **Level II:** The Principal	**Intent**: To support novel, innovative research to understand the magnitude and underlying mechanisms of PTE. • Level I is intended to support high-risk or high-gain research. Requires a mentor as part of the application. • Level II is intended to support a more mature, hypothesis-driven research project. **The following Focus Areas are open to both Levels I and II:** • Innovative Research. • Markers and Mechanisms. • Epidemiology. • Longitudinal Studies.	**Level I:** • Maximum funding of $300,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years. • Indirect costs may be proposed in accordance with the institution's rate agreement. **Level II:** • Maximum funding of $500,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

	Investigator must be an independent investigator at or above the level of Assistant Professor (or equivalent).	Preliminary data, while not required, are encouraged for both levels. Clinical pharmacologic trials are specifically discouraged.	• Indirect costs may be proposed in accordance with the institution's rate agreement.
Quality of Life Award	The PI must be an independent investigator at or above the level of Assistant Professor (or equivalent).	Intent: To support innovative research that improves the quality of life and care for individuals living with the common symptoms of PTE and/or their families and care providers, as related to the ERP's mission. • Level I is intended to support high-risk or high-gain research. Requires a mentor as part of the application. • Level II is intended to support PIs at or above the level of assistant professor (or equivalent) from any field or discipline. **The following Focus Areas are open to both Levels I and II:** • Quality of Life. Preliminary data, while not required, are encouraged for both levels. Clinical pharmacologic trials are specifically discouraged.	**Level I:** • Maximum funding of $300,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years. • Indirect costs may be proposed in accordance with the institution's rate agreement. **Level II:** • Maximum funding of $500,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years. • Indirect costs may be proposed in accordance with the institution's rate agreement.

http://cdmrp.army.mil/erp/default

Gulf War Illness Research Program (2021)

Applications submitted to the FY21 GWIRP must address one or more of the following Overarching Challenges:

- **Treatments:** Eliminate the health consequences associated with GWI and revolutionize treatment.
- **Diagnosis:** Better define and diagnose GWI.
- **Subtyping:** Distinguish subtypes to better target treatments; or monitor therapy; or identify severity of GWI; or why GWI is worse for some Veterans than for others.
- **Determinants:** Identify and validate determinants of GWI, latency, and impacts on organs and systems.
- **Consequences:** Determine whether GWI alters risk for developing neurological conditions, cancers, or other serious conditions; or whether GWI alters outcomes of other infections/diseases.
- **Communicate & Educate:** Help Veterans, their caregivers, and clinicians communicate effectively about GWI, its symptoms, and potential treatments.

Award	Eligibility	Key Elements	Funding
Idea Award	Independent investigators at all academic levels	• Supports high-risk/high-reward research in the earliest stages of development that will contribute to markers or treatments for GWI. • Emphasis is on impact and innovation; applications must articulate the pathway to making a clinical impact for Veterans with GWI, even if a clinical impact is not an immediate outcome. • Preliminary data are not required. • Biorepository Contribution Option supports additional costs associated with submission of samples and data to the GWIRP-supported Boston Biorepository, Recruitment, and Integrative Network (BBRAIN).	• Maximum funding of **$200,000** for direct costs (plus indirect costs). • Biorepository Contribution Option: additional direct costs up to $**20,000.** • Maximum period of performance is 2 years.

		• Clinical trials are not allowed. • Pre-application is required; full application submission is by invitation only.	
Research Advancement Award	Independent investigators at all academic levels	• Supports applied research in GWI aimed at continued expansion and validation of markers and treatments already supported by evidence in the GWI field. • Preliminary data and/or strong rationale are required. • Biorepository Contribution Option supports additional costs associated with submission of samples and data to the GWIRP-supported BBRAIN. • Clinical trials are not allowed. • Pre-application is required; full application submission is by invitation only.	• Maximum funding of **$600,000** for direct costs (plus indirect costs). • Biorepository Contribution Option: additional direct costs up to **$20,000**. • Maximum period of performance is 3 years.
Clinical Evaluation Award	Independent investigators at all academic levels	• Supports small, proof-of-concept trials (pilot, first–in-human, Phase I-IIa), clinical trials, or larger statistically powered biomarker trials with the potential to have a significant impact on GWI. • Preliminary data are required. • Biorepository Contribution Option supports additional costs associated with submission of samples and data to the GWIRP-supported BBRAIN. • Clinical Consortium Collaboration Option supports additional costs associated with collaboration	• Maximum funding of **$1.5M** for direct costs (plus indirect costs). • Biorepository Contribution Option: additional direct costs up to **$20,000.** • Clinical Consortium Collaboration Option: additional direct costs up to **$200,000.** • Maximum period of performance is 3 years.

		with the Gulf War Illness Clinical Trials and Interventions Consortium (GWICTIC). • Pre-application is required; full application submission is by invitation only.	
Therapeutic/Biomarker Trial Award	Independent investigators at all academic levels.	• Supports large-scale, pivotal (Phase IIb or III) trials that revolutionize the clinical management of GWI. • Objective pharmacodynamic biomarkers to measure the biological effect of an investigational therapeutic or predictive/cohort-selective biomarkers that indicate whether a specific therapy will be effective in Veterans with GWI must be included in the trial design. • Substantial preliminary data in a GWI veteran population required. • Investigators must have experience in successfully leading large-scale projects and demonstrated the ability to implement a clinical project successfully. • Biorepository Contribution Option supports additional costs associated with submission of samples and data to the GWIRP-supported BBRAIN. • Clinical Consortium Collaboration Option supports additional costs associated with collaboration	• Maximum funding of $5.0M for direct costs (plus indirect costs). • Biorepository Contribution Option: additional direct costs up to $20,000. • Clinical Consortium Collaboration Option: additional direct costs up to $500,000. • Maximum period of performance is 3 years.

		with the GWIRP-supported GWICTIC. • Funding must be used to support a clinical trial. • Pre-application is required; full application submission is by invitation only.	
New Investigator Award	**Transitioning Postdoctoral Fellow:** Senior postdoctoral fellows with at least 3 years of postdoctoral training. **Early-Career Investigator:** Independent investigators within 5 years of last training position. **New GWI Researcher:** Established independent investigators who have received less than $300,000 in federally funded, non-mentored GWI research.	• Encourages applications from early-stage and established investigators new to the field of GWI research. • Previous experience in GWI research is not required; however, collaborations with experienced GWI researchers is strongly encouraged. • Preliminary data are not required. • Biorepository Contribution Option supports additional costs associated with submission of samples and data to the GWIRP-supported BBRAIN. • Clinical trials are not allowed. • Pre-application is required; full application submission is by invitation only.	• Maximum funding of $500,000 for direct costs (plus indirect costs). • Biorepository Contribution Option: additional direct costs up to $20,000. • The maximum period of performance is 3 years.

http://cdmrp.army.mil/gwirp/default

Hearing Restoration Research Program (2020)

- Applications submitted to the FY20 HRRP must address one or more of the following Focus Areas:
- Accelerate translation of biological regeneration/repair mechanisms into therapies that treat auditory system injury and restore auditory function. For example, but not limited to:
    - Hair cell regeneration/repair/recovery
    - Neural regeneration/repair/recovery
    - Treatment for synaptopathy and hidden hearing loss
- Diagnostic tests that help differentiate sensory, neural, synaptic, and central processing disorders, that may inform applicability and outcomes for current or future hearing restoration therapeutics.
- Develop reliable in-vitro human models to facilitate the understanding, derivation and characterization of human auditory cells, and/or to facilitate the evaluation of hearing restoration therapies.
- Develop and/or validate techniques/methods beyond the audiogram to diagnose acute auditory system injury in austere or remote environments. For example, but not limited to, simple and rapid assessments that are compatible with portable platforms.

Award	Eligibility	Key Elements	Funding

Focused Research Award (FRA)	Independent investigators at all academic levels (or equivalent)	**Preproposal is required; application submission is by invitation only.**
		
		• **Funding Level 1** supports exploratory, high-risk/high-reward research in the earliest stages of development.
		
		  ○ Research must have the potential to yield new avenues of investigation, such as new approaches, new research tools, or new paradigms.
		  ○ While preliminary data is not required, applicants
			Funding Level 1:
			
			• Maximum funding of $250,000 for direct costs (plus indirect costs).
			• The maximum period of performance is 2 years.
			
			Funding Level 2:
			
			• Maximum funding of $1M for direct costs (plus indirect costs).
			• The maximum period of performance is 3 years.

		must provide solid rationale of the research idea. ○ The investigating team must have sufficient expertise to test the idea. • **Funding Level 2** supports the advancement of more mature research that has the potential to make significant advancements toward clinical translation. ○ Preliminary data supporting the readiness and feasibility of the proposed research is required. ○ May include, as a portion of the proposed research, a pilot clinical trial component that collects preliminary data to inform the feasibility, rationale, and design of subsequent clinical trials. • The PI is responsible for selecting the funding level most appropriate for the research proposed. The funding level should be selected based on the scope of the research project, rather than the amount of the budget.	**Funding Level 2 with Pilot Clinical Trial Option:** • Maximum funding of $1.25M for direct costs (plus indirect costs). • The maximum period of performance is 3 years.

		• Tinnitus or vestibular-related research is excluded.	

http://cdmrp.army.mil/hrrp/default

Joint Warfighter Medical Research Program (2019)

Details are currently not available for 2019. Further information can be found at https://cdmrp.army.mil/jwmrp/default

Kidney Cancer Research Program (2020)

Applications submitted to the FY20 KCRP Idea Development Award mechanism are encouraged to address one or more Areas of Emphasis. Area of Emphasis can be found at https://cdmrp.army.mil/pubs/press/2020/20kcrppreann

Award	Eligibility	Key Elements	Funding ($)
Translational Research Partnership Award	The Initiating Principal Investigator (PI) must be at or above the level of Assistant Professor or equivalent. The Partnering PI must be at or above the level of Assistant Professor or equivalent. Postdoctoral fellows are not eligible to be Partnering PIs.	• Supports partnerships between clinicians and laboratory scientists that accelerate ideas in kidney cancer into clinical applications. • Supports translational correlative studies. • Preliminary data required. • Funding for clinical trials not allowed.	Maximum funding of **$750,000** in direct costs (plus indirect costs). Period of performance is not to exceed **3** years. Indirect costs may be proposed in accordance with the institution's negotiated rate agreement.

Academy of Kidney Cancer Investigators – Early-Career Investigator Award	Within 3 years of last postdoctoral research position (Ph.D.) or clinical fellowship (M.D.), or equivalent, as of full application submission deadline Letter attesting to eligibility required.	• Supports addition of new Early-Career Investigators (ECIs) to the unique, interactive virtual academy that provides intensive mentoring, national networking, and a peer group for junior faculty. • ECIs whose ability to commit to conducting kidney cancer research is limited by lack of resources or other overwhelming obstacles are encouraged to apply. • Requires Designated Mentor who is an experienced kidney cancer researcher with kidney cancer funding. • Designated Mentor not required to be at the same institution as the ECI. • Preliminary data required. • Clinical trials allowed.	Maximum funding of $725,000 for direct costs (plus indirect costs). Maximum period of performance 4 years.
Clinical Consortium – Clinical Trial Site Award	Independent investigators at or above the level of Assistant Professor (or equivalent) are eligible	• Supports the expansion of a consortium that will facilitate the rapid execution of collaborative clinical trials that will bring to market high impact, novel therapeutics that will ultimately and significantly decrease the impact of kidneycancer. • Funds may not be used for research or development of clinical protocols. • Trials that incorporate investigations of biomarkers for risk assessment, early detection, prediction or aggressiveness, and/or progression of kidney cancer are encouraged. • Up to two Clinical Trial Sites will be selected and will be jointly responsible for proposing, selecting, and conducting trials within the existing Kidney Cancer Research Consortium. • Sites must provide plans for accruing patients from populations disproportionately affected by kidney cancer. • The consortium is expected to achieve financial self-sufficiency, such that operations can continue after the award period ends.	Maximum funding of $600,000 for direct costs (plus indirect costs). Maximum period of performance is 2 years. Indirect costs may be proposed in accordance with the institution's negotiated rate agreement.
Idea Development Award	**Established Investigators:** Independent investigators at or above the level of Assistant Professor	• Supports new ideas that represent innovative, high-risk/high-gain approaches to kidney cancer research, and have the potential to make an important contribution to kidney cancer. • Innovation and Impact are the most important review criteria. • Different funding options, based on the scope of the proposed research, are available with compelling justification.	Maximum funding of $600,000 in direct costs (plus indirect costs). Period of performance not to exceed 3 years.

	(or equivalent) and 10 years or more from a terminal degree; or Early-**Career Investigators:** Investigators at the level of Assistant Professor, Instructor, or Assistant Research Professor (or equivalent) and less than 10 years from a terminal degree (excluding time spent in medical residency or family medical leave) at the time of application submission deadline are eligible.	• Preliminary data are required. • Clinical trials are not allowed.	Indirect costs may be proposed in accordance with the institution's negotiated rate agreement. **Early Detection Studies Option:** Maximum funding of $650,000 in direct costs (plus indirect costs). Period of performance not to exceed 3 years. Indirect costs may be proposed in accordance with the institution's negotiated rate agreement. Population Science and Prevention Studies Option: Maximum funding of $2 million in direct costs (plus indirect costs). Period of performance not to exceed 4 years. Indirect costs may be proposed in accordance with the institution's negotiated rate agreement.
Postdoctoral and Clinical Fellowship Award	Must have completed requirements for a Ph.D. and/or M.D. Must be in the laboratory or clinical	• Supports research opportunities focused on kidney cancer for individuals in the early stages of their careers • A designated Mentor who is an experienced kidney cancer researcher is required. • Clinical trials are not allowed.	Maximum funding of $195,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

	setting where proposed research will be performed. Must have no more than 4 years of postdoctoral and/or mentored clinical research experience. Investigators in non postdoctoral and/or clinical fellow positions are not eligible.		Indirect costs may be proposed in accordance with the institution's negotiated rate agreement.
Clinical Research Nurse Development Award	The Initiating Principal Investigator (PI) must be at or above the level of Assistant Professor (or equivalent) with an M.D. and/or M.D./Ph.D. degree (or equivalent). The Partnering PI must be a clinical research nurse coordinator (or equivalent) with at least 2 years of oncology or cancer clinical trial research nurse experience,	• Supports partnerships between a clinician and a clinical research nurse coordinator (or equivalent). • Supports kidney cancer research and the career development of kidney cancer clinical trial research nurses. • Clinical trials are not allowed; correlative studies to clinical trials are allowed.	Maximum funding of $300,000 for direct costs (plus indirect costs). • Maximum period of performance is 2 years. Indirect costs may be proposed in accordance with the institution's negotiated rate agreement.

	and have a Registered Nurse license and/or a Bachelor's, Master's, or Doctoral degree in nursing.		

http://cdmrp.army.mil/kcrp/default

Lung Cancer Research Program (2021)

Applications submitted to the FY21 LCRP must address one or more of the following Areas of Emphasis:

- Identify innovative strategies for prevention of the occurrence of lung cancer.
- Identify innovative strategies for the screening and early detection of lung cancer.
- Understand the molecular mechanisms of initiation and progression to lung cancer.
- Understand contributors to lung cancer development other than tobacco.
- Identify innovative strategies for the treatment of lung cancer.
- Identify innovative strategies for the prevention of recurrence of or metastases from lung cancer.
- Develop or optimize prognostic or predictive markers to assist with therapeutic decision-making.
- Understand mechanisms of resistance to treatment (primary and secondary).
- Identify innovative strategies for lung cancer care delivery (clinical management/surveillance/symptom management).
- Understand factors that contribute to the health disparities in lung cancer, such as biological contributors; environmental, social, and cultural factors; and access to health care.

Award	Eligibility	Key elements	Funding
Concept Award	Investigators at all academic levels	• Supports highly innovative, untested, potentially groundbreaking concepts in lung cancer • Emphasis on innovation • Clinical trials not allowed	Maximum funding of **$100,000** in direct costs (plus indirect costs) Period of performance should not exceed **1** year

		• Preliminary data discouraged • Relevance to military health strongly encouraged.	
Career Development Award	***Principal Investigator:*** Independent investigators at the level of Assistant Professor, Instructor, or equivalent; must be **within 5 years** of first faculty appointment ***Mentor:*** At or above the level of Associate Professor (or equivalent); have a proven publication and funding record in lung cancer research	• Supports early-career, independent researchers to conduct research under mentorship of an experienced lung cancer researcher • Clinical trials not allowed • Preliminary data not required • Relevance to military health strongly encouraged.	Maximum funding of **$250,000** in direct costs (plus indirect costs) Period of performance should not exceed **2** years
Idea Development Award	***Established Investigators***: Independent investigators at or above the level of Assistant Professor (or equivalent); ***or*** ***New Investigators***: Investigators that meet the following criteria at the application submission deadline date: • Have not previously received a LCRP Idea Development Award or Early Investigator Synergistic Idea Award • Are **within 10 years** of first faculty appointment (or equivalent)	• Supports new ideas in the early stages of development representing innovative, high-risk/high-gain research • Emphasis on innovation and impact • New Investigator category supports applicants early in their faculty appointments or in the process of developing independent research careers • Clinical trials not allowed • Preliminary data required • Relevance to military health strongly encouraged.	Maximum funding of **$350,000** in direct costs (plus indirect costs) Period of performance should not exceed **2** years
Investigator-Initiated Translational Research Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• Supports translational research that will develop promising ideas in lung cancer into clinical	Maximum funding of **$600,000** in direct costs (plus indirect costs)

		applications. Translational research may be defined as an integration of basic science and clinical observations
		• This mechanism is intended to fund a broad range of translational studies, including, but not limited to, the following:
		  ○ Studies advancing /translating in vitro and/or animal studies to applications with human samples/cohorts.
		  ○ Late-stage preclinical work leading to/preparing for a clinical trial, e.g., Investigational New Drug submission.
		  ○ Correlative studies that are associated with an ongoing or completed clinical trial and projects that develop endpoints for clinical trials.
		• Preliminary data required
		• Relevance to military health strongly encouraged.
			Period of performance should not exceed 3 years

Clinical Translational Research Partnership Award	Investigators at or above the level of Assistant Professor (or equivalent)	• Supports translational studies that include a clinical trial. • This mechanism is intended to fund partnerships between clinicians and laboratory scientists	Maximum funding of **$1.2M** for direct costs (plus indirect costs) Maximum period of performance is **3** years

		that accelerate ideas in lung cancer into clinical applications. ○ One partner is strongly encouraged to be from either a military treatment facility or a Department of Veterans Affairs medical center. • Non-traditional partnerships are encouraged. • Preliminary data required. • Relevance to military health strongly encouraged. • Patient research advocate involvement.	

http://cdmrp.army.mil/lcrp/default

Lupus Research Program (2020)

Applications submitted to the FY20 LRP Idea Award and/or Impact Award must address one or more of the following Focus Areas:

- Understanding how lupus disease heterogeneity impacts risk of disease, disease presentation, clinical course, and outcomes; using a diverse range of research disciplines including, but not limited to, biopsychosocial studies, personalized medicine, variation in treatment studies, personalized medicine, variation in treatment studies, health economics, socioeconomic studies, environmental studies, and epidemiological studies
- Understanding lupus disease heterogeneity including, but not limited to, strategies and technologies to subtype patients and understanding lupus disease mechanisms
- Improving quality of life for individuals living with lupus including, but not limited to, access to healthcare resources, outcome research, symptom control, comparative effectiveness research, and issues and challenges that when addressed make day-to-day living with lupus easier and life more fulfilling
- Understanding how the underlying genetic components and gene-environment interactions of lupus relate to clinical disease characteristics using functional genomic studies

- Determining the pathobiology of lupus disease in target human tissues including, but not limited to, imagining studies, genomics of lupus in particular tissues, and metabolomics

Applications submitted to the FY20 LRP Transformative Vision Award must address the following Focus Area:

- Improving quality of life for individuals living with lupus including, but not limited to, access to healthcare resources, outcome research, symptom control, comparative effectiveness research, and issues and challenges that when addressed make day-to-day living with lupus easier and life more fulfilling

Award	Eligibility	Key Elements	Funding ($)
Idea Award	Investigators at or above the level of postdoctoral fellow (or equivalent)	• Supports innovative, high-risk/high-reward research that could ultimately lead to a critical discovery or major advancement. • Emphasis is on innovation. • Clinical trials are not allowed. • Preliminary data are not required.	Maximum funding of $300,000 for total costs (direct plus indirect costs). Maximum period of performance is 2 years.
Transformative Vision Award	Investigators at or above Assistant Professor (or equivalent).	• Supports research that will have near-term impacts on the health-related quality of life of patients of all ages and those with disproportionate health burdens. • Emphasis is on near-term impact to quality of life. • Clinical trials are allowed. • Animal studies are not allowed. • Preliminary data are required.	Maximum funding of $2.5 million for total costs (direct plus indirect costs). Maximum period of performance is 4 years.
Impact Award	Investigators at or above Assistant Professor (or equivalent)	• Supports high-risk/high-reward research, which if successfully addressed, has the potential to make a major impact in lupus research. • Emphasis is on impact. • Clinical trials are not allowed. • Preliminary data are encouraged but not required.	Maximum funding of **$750,000** for total costs Maximum period of performance is **4** years

http://cdmrp.army.mil/lrp/default

Melanoma Research Program (2020)

Applications for the Idea Award, Translational Research Award, Team Science Award, and the Mid-Career Accelerator Award submitted to the FY20 MRP must address one or more of the following focus areas:

- Prevention of melanoma initiation factors (e.g., UV radiation)
- Prevention of melanomagenesis and precursor lesions (e.g., novel genetic and epigenetic drivers, oncogene induced senescence)
- Understanding the tumor microenvironment
- Primary Tumor
- Regional Nodes
- Distal Nodes
- Bioengineering (e.g., computational, imaging) approaches to address diagnostics, high risk markers, dormancy, and metastasis
- Therapeutic Prevention (e.g., interruption of disease progression, recurrence)
- Minimal Residual Disease (e.g., chemoprevention, micro-metastasis)

Applications for the Technology Development Partnership Award submitted to the FY20 MRP *must* address the focus area: Bioengineering (e.g., computational, imaging) approaches to address diagnostics, high risk markers, dormancy, and metastasis.

Award	Eligibility	Key elements	Funding
Mid-Career Accelerator Award	Assistant or Associate Professors more than 7 years post-first faculty appointment. Instructors and Full Professors are not eligible	• Preproposal is required; application submission is by invitation only. • Supports mid-career researchers to conduct impactful melanoma research. • Must address at least one of the FY20 Focus Areas. • Must show evidence of at least one peer reviewed extramural funding award. • Preliminary data is required.	Maximum funding of $700,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

		• Clinical trials are not allowed.	
Idea Award	Independent investigators with a faculty-level appointment (or equivalent).	• Preproposal is required; application submission is by invitation only. • Supports new ideas that represent innovative, high-risk/high-gain approaches to melanoma research. • Emphasis on Innovation and Impact. • Must address at least one of the FY20 Focus Areas. • Preliminary data are not required. • Clinical trials are not allowed.	Maximum funding of $300,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Team Science Award	At least two and up to three investigators must partner in one overarching multidisciplinary research study. **Initiating Principal Investigator (PI):** Independent investigators at or above the level of Associate Professor (or equivalent).	• Preproposal is required; application submission is by invitation only. • Supports new or existing partnerships between two or three independent investigators focusing research across the whole research spectrum. • Investigators are expected to demonstrate within the application, the synergistic components (i.e., leveraging disciplines, expertise or critical resources) that will significantly advance the project such that the research outcomes as a whole will be realized rapidly and efficiently and could not otherwise be	Maximum funding of $700,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

		accomplished through independent efforts of a single investigator. • Emphasis on Synergy, Multi-disciplinary research, and Impact. • Must address at least one of the FY20 Focus Areas. • Preliminary data are required. • Clinical trials are not allowed.	
Translational Research Award	Independent investigators at or above the level of Assistant Professor (or equivalent).	• Preproposal is required; application submission is by invitation only. • Supports studies aiming to leverage existing biobanks, biorepositories, ongoing or completed clinical trials to address a translational question or problem in melanoma. • Emphasis on Translation and Impact. • Must address at least one of the FY20 Focus Areas. • Preliminary data is required. • Clinical trials are not allowed.	Maximum funding of $600,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Technology Development Partnership Award	Two independent investigators with a faculty-level appointment (or equivalent).	• Preproposal is required; application submission is by invitation only. • Supports new or existing partnerships between two independent investigators focusing on bioengineering approaches to address diagnostics, high risk markers, dormancy, and metastasis.	Maximum funding of $700,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

Translational Research Award – Collaborator Option	Two independent investigators at or above the level of Assistant Professor (or equivalent).	• One partner must have a background in biomedical science, and one must have a background in the physical sciences (e.g. engineering, computational science, bioinformatics, or computer science). • Preliminary data is required. • Clinical trials are not allowed. • Preproposal is required; application submission is by invitation only. • Supports two investigators in a joint study aiming to leverage existing biobanks, biorepositories, ongoing or completed clinical trials to address a translational question or problem in melanoma. • Emphasis on Translation and Impact. • Must address at least one of the FY20 Focus Areas. • Preliminary data is required. • Clinical trials are not allowed.	Maximum funding of $700,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

Military Burn Research Program (2021)

Award	Eligibility	Key Elements	Funding ($)
Clinical Translational Research Award	Independent investigators at all academic levels (or equivalent) may be named as PI in the application.	• Supports clinical research projects that are likely to have a major impact on therapy by applying promising and well-founded laboratory, pre-clinical, or clinical research findings to the care of the burn-injured patient. • The proposed study must include clinical research, and may include initial proof of concept trials, studies involving use of human anatomical substances, observational studies, and/or involve some retrospective data analysis. • Large randomized clinical trials are discouraged. • Preliminary data is required. • Animal research is not allowed. • Pre-application is required; application submission is by invitation only.	Maximum funding of $1.5 million for total costs (direct costs plus indirect costs) Maximum period of performance is 4 years
Idea Development Award	Independent investigators at all academic levels (or equivalent) may be named as PI in the application.	• Supports innovative research in the field of burn wound care. • Inclusion of preliminary and/or published data relevant to the proposed research is required. • Feasibility and Impact are important review criteria. • Clinical trials are not allowed. • Pre-application is required; application submission is by invitation only.	Maximum funding of $600,000 for total costs (direct costs plus indirect costs). Maximum period of performance is 3 years.

https://cdmrp.army.mil/mbrp/

Multiple Sclerosis Research Program (2020)

Applications submitted to the FY20 MSRP must address at least one of the Focus Areas relevant to the award mechanism as described in the Table below.

Award	Eligibility	Key Elements	Funding ($)

Clinical Trial Award	Investigators at or above the level of Assistant Professor (or equivalent).	• Pre-application submission is required; application submission is by invitation only.
		• Funds Phase I or II clinical trials relevant to MS; combinations of phases are permitted.
		• Funding must support a clinical trial and may not be used for preclinical studies.
		• Scientific rationale and preliminary data are required.
		• Must address at least one of the following Focus Areas:
		  ○ Promoting Repair, Neuroprotection, and Remyelination in MS.
		  ○ Treatment of MS Symptoms.
			Maximum funding of $1,500,000 for direct costs (plus indirect costs).
			
			Maximum period of performance is 4 years.

Exploration - Hypothesis Development Award	**Established Investigators:** Independent investigators at or above the level of Assistant Professor (or equivalent)	• Pre-application submission is required; application submission is by invitation only.	Maximum funding of $150,000 for direct costs (plus indirect costs) Maximum period of performance is **2** years

	or **New Investigators:** • Independent investigators no more than 3 years from the start of their faculty position. • Must not have a Research Project Grant (R01) or similar non-mentored award.	• Supports the initial exploration of innovative, high-risk, high-gain, and potentially groundbreaking concepts in the MS research field. • Preliminary data not required. • Clinical trials not allowed. • **New Investigator Option** supports applicants early in their faculty appointments. • **Must address at least one of the following Focus Areas**: o Promoting Central Nervous System Regenerative Potential in Demyelinating Conditions. o Correlates of Disease Activity and Progression in MS. o Biology and Measurement of MS Symptoms. o Identify the Role of Factors in MS Etiology, Prodome, Onset, and Evolution, Including Repair Processes	

Investigator-Initiated Research Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• Pre-application submission is required; application submission is by invitation only.
		• Supports highly rigorous, high-impact research with the potential to make an important contribution to MS research and/or patient care.
		• Preliminary data required.
		• Clinical trials not allowed.
		• **Must address at least one of the following Focus Areas:**
		  ○ Promoting Central Nervous System Regenerative Potential in Demyelinating Conditions.
		  ○ Correlates of Disease Activity and Progression in MS.
		  ○ Biology and Measurement of MS Symptoms.
		  ○ Identify the Role of Factors in MS Etiology, Prodome, Onset, and Evolution, Including Repair Processes
			Maximum funding of **$600,000** for direct costs (plus indirect costs)
			
			Maximum period of performance is **3** years

http://cdmrp.army.mil/msrp/default

Neurofibromatosis Research Program (2021)

The NFRP encourages applications that specifically address the critical needs of the NF community in one or more of the FY21 Areas of Emphasis. Not all Areas of Emphasis are applicable to each award mechanism offered by the FY21 NFRP. If the proposed research project does not address one of the FY21 Areas of Emphasis, justification that the proposed research project addresses an important problem related to NF research and/or patient care should be provided. Applications submitted to the FY21 NFRP must address one or more of the following Areas of Emphasis:

- Biomarker discovery, utility, development, and validation
- Non-tumor manifestations not limited to:
  - Pain
  - Cognitive Manifestations
  - Sleep
- Heterogeneity of NF-related tumors
- Novel disease and treatment response markers using genetics, genomics, epigenetics, systems biology, metabolomics, or similar approaches
- Preclinical efficacy studies
- Target identification, drug discovery
- Nutritional, environmental, and other modifiers of NF
- Health services research

Award	Eligibility	Key Elements	Funding
Clinical Trial Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• Fund Phase 0, I, or II clinical trials relevant to NF and/or schwannomatosis; combinations of phases are permitted. • Funding must support a clinical trial and may not be used for preclinical studies. • Scientific rationale and preliminary data required for Phase I, II clinical trial applications.	• Maximum funding of $800,000 for direct costs (plus indirect costs) • Maximum funding of $1,000,000 for direct costs (plus indirect costs) for applications including a Collaborator • Maximum period of performance is 4 years
Clinical Trials Consortium Award	TBD	• Supports a consortium of PIs and Organizations that will conceive, design, develop, and conduct	• TBD

		collaborative Phase I and II clinical evaluations of promising therapeutic agents for the management or treatment of NF1, NF2, and schwannomatosis.	
Exploration - Hypothesis Development Award	All academic levels (or equivalent)	• Funds the initial exploration of innovative, high-risk, high-gain, and potentially groundbreaking concepts in NF research. • Projects involving human subjects or human biological substances must be exempt under Code of Federal Regulations, Title 32, Section 219, Part 104(d) (32 CFR 219.104[d]) or eligible for expedited review under 32 CFR 219.110 or 21 CFR 56.110. • Preliminary and/or published data is encouraged but not required. • Clinical trials are not allowed. • Mentorship is highly encouraged.	• Maximum funding of $100,000 for direct costs (plus indirect costs) • Maximum period of performance is 2 years
Investigator-Initiated Research Award	Independent investigators at or above the level of Assistant Professor (or equivalent) and must plan to commit at least a 10% level of effort for each budget period throughout the entirety of the award	• Fund highly rigorous, high-impact research projects that have the potential to make an important contribution to NF research and/or patient care. • Optional Feature: Applications meeting criteria identified in the announcement may apply for a higher level of funding for the following options: Qualified Collaborator and/or NF Open Science Initiative (NF-OSI).	• Maximum funding of $525,000 for direct costs (plus indirect costs) • Maximum funding of $575,000 for direct costs (plus indirect costs) for applications including an Optional Qualified Collaborator • Maximum funding of **$625,000** for direct costs (plus indirect costs) for applications including

		• **Preliminary and/or published data required.** • Clinical trials not allowed.	both, an Optional Qualified Collaborator and the NF-OSI
Early Investigator Research Award	• Investigators must be involved in a postdoctoral training or medical residency program and possess at least 1 and up to 4 years continuous postdoctoral research experience. • Must have successfully defended a doctoral thesis or possess an M.D. degree and commit at least 50% of his/her effort towards project.	• Supports research opportunities focused on NF for individuals in the early stages of their careers. • PIs must have a designated mentor who is an experienced NF researcher.	• Maximum funding of $200,000 for direct costs (plus indirect costs) • Maximum period of performance is 2 years
New Investigator Award	Independent investigators at or below the level of Assistant Professor (or equivalent) or an established investigator at or above the level of Assistant Professor seeking to transition into a career in NF research	• Support the continued development of promising independent investigators and/or the transition of established investigators into a career in the field of NF research • Experience in NF research is allowed, but not required • Preliminary and/or published data required • Clinical trials not allowed	• Maximum funding of $450,000 for direct costs (plus indirect costs) • Maximum period of performance is 3 years
Synergistic Idea Award	Investigators at or above the level of Assistant Professor (or equivalent)	• Supports new or existing partnerships between two or three investigators to address a central innovative question or problem in NF that may include high risk, provided there is a potential for significant impact.	• Maximum funding of $2M for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

		• Investigators are expected to demonstrate within the application the synergistic components (i.e., leveraging disciplines, expertise, or critical resources) that will significantly advance the project such that the research outcomes as a whole will be realized rapidly and efficiently and could not otherwise be accomplished through independent efforts of a single investigator. • Preliminary and/or published data are required. • Synergy, Research Strategy, Personnel, and Impact are the most important review criteria. • Clinical trials are not allowed.	

http://cdmrp.army.mil/nfrp/default

Neurotoxin Exposure Treatment Parkinson's (2020)

Applications submitted to the FY20 NETP must address at least one of the following Focus Areas:

- Quantifiable gene - environment interactions and the risk for or progression of Parkinson's disease following neurotoxin exposure. Though not limited to this list, the following are some examples of areas that are encouraged:
    - Genome wide genotyping/sequencing of existing cohorts (must include data sharing plan)
    - Environmental factors (toxins, medications, dietary, caffeine, among others)
    - Unbiased screens with biological validation
- Basic biology of non-motor symptoms that could lead to the development of new treatments for Parkinson's disease following neurotoxin exposure. Though not limited to this list, the following are some examples of areas that are encouraged:

    - Sleep
    - Cognition (relevant to PD)
    - Psychiatric dysfunction
    - Autonomic dysregulation
- System-level mechanism of dopamine refractory motor symptoms in Parkinson's disease, including postural instability, freezing of gait, and treatment-associated dystonia, that could lead to development of new treatments in patients with neurotoxin exposure. Though not limited to this list, the following are some examples of approaches that could be used:
    - Circuitry
    - Pathophysiology
    - Neurochemistry
- Clinical and research application of digital health technology leading to development of new treatments for Parkinson's disease in those individuals exposed to neurotoxins.
    - Early identification
    - Innovative data analytic methods
    - Disease subtyping

Award	Eligibility	Key Elements	Funding ($)
Investigator-Initiated Research Award	Independent investigators at or above the level of assistant professor (or equivalent).	• Supports highly rigorous, multidisciplinary, high-impact research projects that have the potential to make an important contribution to neurotoxin exposure- and treatment-related Parkinson's research. This award mechanism supports the full spectrum of research from basic science through clinical research. • Preliminary data to support feasibility are required. ○ Any unpublished, preliminary data provided should originate from the	Maximum funding of $1.2M in total costs. Maximum period of performance 3 years.

		laboratory of the Principal Investigator (PI) or a member(s) of the research team. • Clinical trials are not allowed • Applications to this award mechanism must address at least one of the four FY20 NETP Focus Areas.	
Early Investigator Research Award	Postdoctoral or clinical fellow, instructor, or assistant professor within 10 years of advanced degree or residency training completion (or equivalent) Verification of eligibility criteria must be provided in an Eligibility Statement signed by an appropriate institutional official and the PI.	Supports neurotoxin exposure- and treatment-related Parkinson's research opportunities for individuals in the early stages of their careers, under the guidance of a designated Mentor. • The Early Investigator is considered the Principal Investigator (PI) of the application and must exhibit strong potential for, and commitment to, pursuing a career as an investigator at the forefront of Parkinson's disease research; however, the PI is not required to have previous Parkinson's disease research experience. o Applications must include at least one Mentor, appropriate to the proposed research project, who has experience in Parkinson's disease research and mentoring as demonstrated by a record of active funding, recent publications, and successful mentorship. The selected Mentor(s) should also demonstrate a clear commitment to the development of the PI toward independence as a	Maximum funding of $400,000 in total costs. Maximum period of performance 2 years.

		neurotoxin exposure- and treatment-related Parkinson's disease researcher. • Preliminary data not required • Clinical trials are not allowed • Applications to this award mechanism must address at least one of the four FY20 NETP Focus Areas.	
Synergistic Idea Award	Each investigator must be at or above the level of Assistant Professor (or equivalent).	• Supports new ideas that represent synergistic approaches to neurotoxin exposure- and treatment-related Parkinson's research involving two to four faculty-level (or equivalent) Principal Investigators (PIs). • The combined efforts of the PIs should utilize their complementary and synergistic perspectives to address a central problem or question in neurotoxin exposure- and treatment-related Parkinson's research. • Designed to support both new and pre-existing partnerships, and encourages participation of PIs from other research fields. o The NETP seeks applications from investigators working in a wide spectrum of disciplines including, but not limited to, basic science, engineering, bioinformatics, population science, translational research, and clinical research. • Preliminary data is not required.	Maximum funding of $3M in total costs. Maximum period of performance is 4 years.

		• Clinical trials are not allowed. • Applications to this award mechanism must address at least one of the four FY20 NETP Focus Areas.	

Orthotics and Prosthetics Outcomes Program (2021)

Applications submitted to the FY21 OPORP must address at least one of the following Focus Areas:

- **Orthoses or Prostheses Form:** Optimize patient outcomes through the analysis and characterization of variables related to the form of currently available clinical options such as device size, shape, material, and/or configurations.
- **Orthoses or Prostheses Fit:** Optimize patient outcomes related to the human-device interface through the analysis of variables in currently available clinical options that facilitate fit-related metrics such as comfort, limb health, and/or usability.
- **Orthoses or Prostheses Control:** Optimize patient outcomes through the analysis of variables related to currently available device mechanisms such as device control, sensors, and passive or active response.
- **Orthoses or Prostheses Function:** Optimize patient outcomes by analyzing device-inclusive care protocols and interventions to inform best practices such as evaluation and prescription, timing of interventions, community functioning, and multidisciplinary approaches to clinical care in order to understand short- and long-term outcomes with respect to activities of daily living and other real-world activities.

Award	Eligibility	Key Elements	Funding ($)
Clinical Research Award	Independent investigators at all academic levels (or equivalent)	• Supports clinical research but not clinical trials. • Proposed clinical research projects may include (but are not limited to) methodologies and designs such as surveys, observational studies, or meta-analysis and systematic reviews that focus on outcomes related to the FY21 OPORP focus areas. • **Funding Level 1** supports pilot research studies that have the potential to make significant advancements toward clinical translation. Preliminary data are encouraged but not required for this Funding Level. • **Funding Level 2** supports research that has the potential to make significant advancements toward clinical translation. Proposed projects may	**Funding Level 1:** • Maximum funding of $350,000 for total costs. • Maximum period of performance is 2 years. **Funding Level 2:**

		include large-scale studies that, if successful, will produce high-quality outcomes that provide strong support for evidence-based practice and/or have the potential to drive changes in clinical practice. Preliminary data and/or published data from the literature that are relevant to the orthotic and/or prosthetic device outcomes and support the rationale for the proposed research are required. • Preclinical studies using animals are **not** allowed.	• Maximum funding of $2M for total costs. • Maximum period of performance is 4 years.
Clinical Trial Award	Independent investigators at all academic levels (or equivalent)	• Supports clinical trials with the potential to have a significant impact on improving the health and well-being of individuals with limb loss and/or limb impairment. • **Funding Level 1** supports pilot and early stage clinical trials that are exploratory and involve limited human exposure (e.g., small sample size) with the potential to make significant advancements toward clinical translation. Preliminary data are encouraged but not required for this Funding Level. • **Funding Level 2** supports large clinical trials with the potential to make significant advancements toward clinical translation. Proposed projects may include large-scale trials that, if successful, will produce high-quality outcomes with robust, statistically relevant participant numbers to provide strong, definitive support for evidence-based practice and/or have the potential to drive changes in clinical practice. Pragmatic clinical studies, randomized controlled trials, and comparative effectiveness studies are welcome and encouraged. Preliminary data relevant to the proposed clinical trial are required. • Preclinical research is not allowed.	**Funding Level 1:** • Maximum funding of $350,000 for total costs. • Maximum period of performance is 2 years. **Funding Level 2:** • Maximum funding of $4M for total costs. • Maximum period of performance is 4 years.

http://cdmrp.army.mil/oporp/default

Ovarian Cancer Research Program (2021)

The FY21 Defense Appropriation provides funding to the Department of Defense Ovarian Cancer Research Program (OCRP) to support patient-centered research to prevent, detect, treat, and cure ovarian cancer to enhance the health and well-being of Service members, Veterans, retirees, their family members, and all women impacted by this disease.

Award	Eligibility	Key Elements	Funding ($)
Clinical Translational Research Award	Must be at or above the level of Assistant Professor (or equivalent).	• Supports translational research addressing high-impact or unmet needs in ovarian cancer. • Supports research projects related to or associated with planned, ongoing, or completed clinical trials supported by other funding sources. • Emphasis on the utilization of precision medicine and computational approaches that identify individual tumor characteristics and predictive biomarkers across diverse groups to optimize patient care and outcomes. • Preliminary data are required. • Clinical trials are not allowed. • Pre-application is required; application submission is by invitation only.	• Maximum funding of $450,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.
Investigator-Initiated Research Award	Must be an independent investigator at or above the level of Assistant Professor (or equivalent). ***Partnering PI Option:*** Up to two investigators may collaborate on a single application, each of whom will be recognized as a Principal	• Supports meritorious basic and clinically oriented research in ovarian cancer. • Impact is an important review criterion. • Preliminary data are required. • Clinical trials are not allowed. • Pre-application is required; application submission is by invitation only.	• Maximum funding of $600,000 for direct costs (plus indirect costs). • Maximum funding of $800,000 for direct costs (plus indirect costs) for Partnering PI Option.

	Investigator (PI) and receive a separate award.		• Maximum period of performance is 4 years.
Ovarian Cancer Academy Award - Early-Career Investigator	Must be within 5 years of their last postdoctoral research position (Ph.D.) or clinical fellowship (M.D.), or equivalent as of the full application submission deadline. A letter attesting to eligibility is required.	• Supports the addition of new Early-Career Investigators (ECIs) to the unique, interactive virtual academy that provides intensive mentoring, national networking, collaborations, and a peer group for junior faculty. • ECIs whose ability to commit to conducting ovarian cancer research is limited by lack of resources or other overwhelming obstacles are encouraged to apply. • A Designated Mentor who is an experienced ovarian cancer researcher with ovarian cancer funding is required. • A Designated Mentor may only mentor one ECI. • The Designated Mentor is not required to be at the same institution as the ECI. • Preliminary data are required. • Clinical trials are allowed. • Pre-application is required; application submission is by invitation only.	• Maximum funding of $725,000 for direct costs (plus indirect costs). • Maximum period of performance is 4 years.
Pilot Award	Investigators at or above the postdoctoral level (or equivalent).	• Supports innovative, high-risk/high-reward research that could ultimately lead to critical discoveries or major advancements that will drive the field of ovarian cancer research forward. • Innovation and Impact are important review criteria.	• Maximum funding of $250,000 for direct costs (plus indirect costs). • Maximum period of performance is 2 years.

		• Goal is to develop preliminary data; thus, preliminary data are not required, but are allowed. • Clinical trials are not allowed. • Pre-application is required and blinded; application submission is by invitation only.	
Teal Expansion Award	Investigators of the following awards: OCRP FY14-FY17 Ovarian Cancer Academy – Early Career Investigator Award • OCRP FY15-FY17 Investigator-Initiated Research Award • OCRP FY15-FY18 Pilot Award	• Supports the expansion of the initial research idea or the generation of a new idea based on the original research project. • Impact is an important review criterion. • Preliminary data are required. • Outcomes Statement is required. • Clinical trials are allowed. • Pre-application is required; application submission is by invitation only.	• Maximum funding of $450,000 in direct costs (plus indirect costs). • Maximum period of performance is 3 years.
Proteogenomics Research Award	Must be at or above the level of postdoctoral fellow or clinical fellow (or equivalent).	• Supports the genomic and/or transcriptomic and/or proteomic analysis of currently available clinical specimens with a focus on answering biologic and pathophysiologic questions of clinical relevance in ovarian cancer. • Innovation and impact are important review criteria. • Analysis of clinical trial-derived specimens and/or large patient specimen cohorts is encouraged. • Clinical trials are not allowed. • Preliminary data are not required but are allowed.	• Maximum funding of $250,000 for direct costs (plus indirect costs). • Maximum period of performance is 2 years.

		• Submission of a Letter of Intent is required prior to full application submission.	
Omics Consortium Award	Must be an independent investigator at or above the level of Assistant Professor (or equivalent).	• Supports a multi-institutional research effort conducted by leading cancer researchers and advocates that focuses on the compilation of new and/or use of existing large datasets to study the origin of ovarian cancer, with an emphasis on early detection and screening. Two options are available: <u>Omics Development Award Option:</u> Funds support assembling consortium members and laying the groundwork for the research project, including proof of concept. • Ovarian cancer advocate(s) are required on the research team. • Funded applicants will be eligible to compete for the consortium award, which will support the execution of the full research project and is anticipated to be offered in FY23, pending availability of funds. <u>Omics Consortium Award Option:</u> The research effort will provide immediate benefits for ovarian cancer patients in initial diagnosis and therapy and the end	*<u>Omics Development Award Option:</u>* • Maximum funding of $400,000 for direct costs (plus indirect costs). • Maximum period of performance is 2 years. *<u>Omics Consortium Award Option:</u>* • Maximum funding of $2.5 million for direct costs (plus indirect costs) from FY21 and future appropriations. • Maximum period of performance is 4 years.

		result will lead to improvements in early detection and screening detection of ovarian cancer. • Consortium should maximize the use of resources and minimize unnecessary duplication among consortium members by sharing resources among all consortium members. • Ovarian cancer advocate(s) are required on the research team. • Submission of a Letter of Intent is required prior to full application submission.	

http://cdmrp.army.mil/ocrp/default

Pancreatic Cancer (2020)

Applications submitted to the FY20 PCARP must address one or more of the following Focus Areas:

- Understanding precursors, origins, and early progression of pancreatic cancer
- Understanding the events that promote pancreatic cancer metastasis
- Understanding the relationship between oncogenic signaling and the tumor microenvironment that drives drug resistance and therapeutic response
- Integration of biologic and imaging biomarkers to drive more precise and earlier detection and prognosis
- Defining viable tumor burden
- Supportive care and patient-reported outcomes, quality of life, and perspectives during treatment and survivorship
- New drug development targeted toward cancer sensitivity and resistance mechanisms including immune mechanisms of resistance (for correlative studies only)
- Development of pharmacological, immunological, or genetic interception approaches

Award	Eligibility	Key Elements	Funding
Idea Development Award	Investigators at or above the level of Assistant Professor (or equivalent) or Early-Career Investigator Partnering Principal Investigator (PI) Option: Investigators at or above the level of Assistant Professor (or equivalent) may collaborate on a single application with a young investigator that meets the following criteria at the application submission deadline date: • Have completed at least 3 years of postdoctoral training or medical residency program. • Is no more than 7 years from the receipt of a terminal degree. • Has the freedom to commit at least 50% time to the project.	• Preproposal is required; application submission is by invitation only. • Supports new ideas that represent innovative, high-risk/high-gain approaches to pancreatic cancer research and have the potential to make an important contribution to one or more of the FY20 PCARP Focus Areas. • Emphasis is equally placed on Innovation and Impact. • Preliminary data are encouraged, but not required. • Clinical trials are not allowed. • Must address at least one of the FY20 PCARP Focus Areas. Early Career Investigator Option supports applicants early in their faculty appointments or in the process of developing independent research careers.	Maximum funding of $500,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years. Early-Career Investigator Partnering PI Option: Maximum funding of $650,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Translational Research Partnership Award	PIs must be at or above the level of Assistant Professor or equivalent. Clinicians must be an M.D., M.D./Ph.D., or equivalent with clinical duties and/or responsibilities.	• Preproposal is required; application submission is by invitation only. • Supports partnerships between clinicians and laboratory scientists that accelerate ideas in pancreatic cancer into clinical applications.	Maximum funding of $750,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

		• Multi-institutional and multi-discipline partnerships are strongly encouraged. • Must address at least one of the FY20 PCARP Focus Areas. • Supports translational correlative studies. • Preliminary data required. • Retrospective tissue analysis, correlative studies, or small pilot clinical studies are permitted.	

Peer Reviewed Alzheimer's Research Program (2021)

All applications for FY21 PRARP Program Announcements must address at least one of the following FY20 Overarching Challenges. The FY20 Overarching Challenges will be award mechanism-specific.

FY21 PRARP Overarching Challenges are listed below.

- **Foundational Research**: Research to examine the interrelationship between military service-related risk factors and subsequent AD/ADRD.
- **Paucity of Clinical Studies:** The paucity of clinical studies to examine the interrelationship between military service-related risk factors and subsequent AD/ADRD.
- **Diagnostics and Prognostics:** The need for technologies, tests, surveys, questionnaires, devices, biomarkers, or analyses to detect the relationship between military service-related risk factors and AD/ADRD.
- **Epidemiology:** The need for epidemiological research to examine the interrelationship between military service, risk and resiliency factors, and subsequent AD/ADRD.
- **Quality of Life:** The need for technologies, assessments, interventions, or devices to benefit individuals, especially affected Service members and Veterans, living with the symptoms of AD/ADRD.
- **Family and Care Support:** The need for technologies, assessments, interventions, or devices that enhance the lives of those providing care to those living with the symptoms of AD/ADRD, especially affected Service members and Veterans.

In addition to addressing one of the specified FY21 Overarching Challenges, applications must also address one or more of the following FY21 Military Risk Factors in support of the FY21 Overarching Challenges. The PRARP FY21 Military Risk Factors are listed below.

- **Traumatic Brain Injury:** Studies investigating how head injuries function as risk factors for subsequent AD/ADRD.
- **Neuropsychological/Neurobehavioral:** Alterations in cognition or behavior that may be associated with subsequent AD/ADRD.
- **Modifiable Risk Factors:** Alterations in activities (e.g., exercise, diet, behaviors, etc.) that may be associated with subsequent AD/ADRD.
- **Vascular:** Studies investigating the vascular (e.g., heart disease, hypertension, hyperlipidemia) contributions to cognitive impairment and dementia risk factors for subsequent AD/ADRD.
- **Inflammation:** Evaluating the pathways of peripheral and brain inflammation and its relationship to subsequent AD/ADRD.
- **Genetic:** Genomic analyses or genetic manipulations that investigate the linkages with subsequent AD/ADRD.
- **Metabolic:** Alterations in bioenergetics (e.g., diabetes, brain metabolism, endocrine dysfunction) that may be associated with subsequent AD/ADRD.
- **Sleep:** Alterations in sleep patterns (e.g., physiological changes or glymphatic changes) that may be associated with subsequent AD/ADRD.

Award	Eligibility	Key Elements	Funding
Convergence Science Research Award	**Level I:** Investigators at the postdoctoral level (or equivalent) or above in any scientific discipline. (Mentor required.) **Level II:** The Principal Investigator (PI) must be an independent investigator at or above the level of Assistant Professor (or equivalent).	**Intent:** Support innovative or novel efforts to generate research resources, tools, or research efforts for researchers and/or practitioners in health sciences. • Funding Level I is intended to support investigators at the postdoctoral level (or equivalent) or above in any scientific discipline. Requires a mentor as part the application. • Funding Level II is intended to support PIs at or above the level of assistant professor (or equivalent) from any field or discipline.	**Level I:** • Maximum funding of $225,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years. **Level II:** • Maximum funding of $500,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

		Applications must address one or more of the following FY21 PRARP Overarching Challenges: • Foundational Research • Paucity of Clinical Studies • Diagnostics and Prognostics • Epidemiology **Applications must address one or more of the following FY21 PRARP Military Risk Factors:** • Traumatic Brain Injury • Neurophysiological/Neurobehavioral • Modifiable Risk Factors • Vascular • Inflammation • Genetic • Metabolic • Sleep Pharmacological interventions are specifically discouraged. Chronic traumatic encephalopathy (CTE) research is prohibited. Preliminary data, while not required, are encouraged.	**For Both Levels:** Indirect costs may be proposed in accordance with the institution's rate agreement.
Innovation in Care and Support Award (InCASA)	**Level I:** Investigators at the postdoctoral level (or equivalent) or above in any scientific discipline. (Mentor Required)	**Intent:** Support innovative and impactful research that improves the quality of life and care for individuals, families, and care providers living with AD/ADRD • Funding Level I is intended to support investigators at the postdoctoral level	**Level I:** • Maximum funding of $225,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

	Level II: The PI must be an independent investigator at or above the level of Assistant Professor (or equivalent).	(or equivalent) or above in any scientific discipline. Requires a mentor as part the application. • Funding Level II is intended to support PIs at or above the level of assistant professor (or equivalent) from any field or discipline. **Applications must address one of the following FY21 PRARP Overarching Challenges:** • Paucity of Clinical Studies • Epidemiology • Quality of Life • Family and Care Support **Applications must address one or more of the following FY21 PRARP Military Risk Factors:** • Traumatic Brain Injury • Neurophysiological/Neurobehavioral • Modifiable Risk Factors • Vascular • Inflammation • Genetic • Metabolic • Sleep Pharmacological interventions are specifically discouraged. CTE research is prohibited.	**Level II:** • Maximum funding of $500,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years. **For Both Levels:** Indirect costs may be proposed in accordance with the institution's rate agreement.

		Preliminary data, while not required, are encouraged.	
Research Partnership Award	The PI and Co-PI(s) must each be an independent investigator at or above the level of Assistant Professor (or equivalent).	**Intent:** To create an avenue for collaborative research partnerships between/among investigators to address a research problem or question in a manner that would be unachievable through separate efforts. Applications must include clearly stated plans for interactions between the partners. The plans must include communication, coordination of research progress and results, and data sharing between/among all investigators and organizations participating in the project. Applications must address one of the following FY21 PRARP Overarching Challenges: • Foundational Research • Paucity of Clinical Studies • Diagnostics and Prognostics • Epidemiology • Quality of Life • Family and Care Support Applications must address one or more of the following FY21 PRARP Military Risk Factors: • Traumatic Brain Injury • Neurophysiological/Neurobehavioral • Modifiable Risk Factors • Vascular • Inflammation	• Funding limit is $1.3M in total costs. • Maximum period of performance is 3 years. • Indirect costs may be proposed in accordance with the institution's rate agreement.

		• Genetic • Metabolic • Sleep Pharmacological interventions are specifically discouraged. CTE research is prohibited. Preliminary data are required	
Accelerating Diagnostics Research Award (ADRA)	The PI must be an independent investigator at or above the level of Assistant Professor (or equivalent).	**Intent:** Supports high-impact, human-based, development of robust diagnostic and/or prognostic biomarkers for military risk factors that pertain to AD/ADRD. Applications must address the following the following FY21 PRARP Overarching Challenge. • Diagnostics and Prognostics Applications must address one or more of the following FY21 PRARP Military Risk Factors: • Traumatic Brain Injury • Neurophysiological/Neurobehavioral • Modifiable Risk Factors • Vascular • Inflammation • Genetic • Metabolic • Sleep The proposed biomarker for investigation must correlate with clinical endpoints to include cognition and/or behavior relevant to the proposed military risk factor and AD/ADRD	• Funding limit is $2.8M in total costs. • Maximum period of performance is 4 years. • Indirect costs may be proposed in accordance with the institution's rate agreement.

		The following biomarker types are encouraged: • Imaging-Related • Fluid-Based (e.g., cerebrospinal fluid, blood, or saliva) • Retinal • Wearable Devices Studies focused on biomarker discovery are discouraged. Animal research is prohibited. Preliminary data regarding the suitability of the biomarker(s) for further testing toward biomarker qualification are required. Pharmacological interventions are specifically discouraged. CTE research is prohibited.	
Leveraging Approaches for Innovation in Care and Support Award (LEAP-InCASA)	The PI and Co-PI(s) must each be an independent investigator at or above the level of Assistant Professor (or equivalent).	**Intent**: Supports innovative and impactful research that improves the quality of life and care for individuals, families and care providers living with AD/ADRD Applications must address one of the following FY21 PRARP Overarching Challenges: • Quality of Life • Family and Care Support	• Funding limit is $2.8M in total costs. • Maximum period of performance is 4 years. • Indirect costs may be proposed in accordance with the institution's rate agreement.

		Applications must address one or more of the following FY21 PRARP Military Risk Factors: • Traumatic Brain Injury • Neurophysiological/Neurobehavioral • Modifiable Risk Factors • Vascular • Inflammation • Genetic • Metabolic • Sleep Requires a Coordinating Center and at least two Partnering sites. The Coordinating Center provides overall leadership and management infrastructure for all research initiatives. The Coordinating Center participates as a separate study arm for each Partnering Site's study. Accrual for each of the research initiatives occurs at both the research site and Coordinating Center. Coordinating and Partnering Sites work together to harmonize research protocols. Coordinating and Partnering Sites work together to analyze data, publish research findings. Partnering Sites initiate independent research initiatives and harmonize their research activities with the Coordinating Site.	

		The Coordinating Center Applicant organization must be from a different institution than the Partnering Sites. The Partnering Sites Applicant organizations must be from different institutions. Animal research is prohibited. Pharmacological interventions are specifically discouraged. CTE research is prohibited.	

http://cdmrp.army.mil/prarp/default

Peer Reviewed Cancer Research Program (2021)

To be considered for funding, applications for the FY21 PRCRP *must* address at least one of the Topic Areas as outlined below. Research applications in the areas of breast, prostate, lung (excluding mesothelioma), kidney, melanoma, or ovarian cancer will *not* be accepted.

- Bladder Cancer
- Blood Cancer
- Brain Cancer
- Cancers associated with the use of beryllium
- Colorectal cancer
- Endometrial cancer
- Esophageal Cancer
- Germ cell Cancers
- Head and neck cancers
- Liver cancer
- Lymphoma
- Mesothelioma
- Metastatic Cancer
- Neuroblastoma
- Paediatric, adolescent, and young adult cancers
- Paediatric brain tumors
- Sarcoma
- Stomach cancers
- Thyroid
- The link between scleroderma and cancer

The FY21 PRCRP Military Health Focus Areas are listed below:
It is central to the vision and mission of the PRCRP that applications address how the proposed research is related to military health, mission readiness, and the cancer health needs of both deployed and non-deployed military personnel, their dependents, Veterans, and other military beneficiaries (i.e., family members of retirees). The FY21 PRCRP requires all applications to answer at least one of the following Military Health Focus Areas:

- Environmental/exposure risk factors associated with cancer
- Mission Readiness
    - Gaps in cancer prevention, early detection/diagnosis, prognosis, and/or treatment that may affect the general population but have a particularly profound impact on the health and well-being of military Service members, Veterans, and their beneficiaries
    - Gaps in quality of life and/or survivorship that may affect the general population but have a particularly profound impact on the health and well-being of military Service members, Veterans, and their beneficiaries

Award	Eligibility	Key Elements	Funding
Behavioral Health Science Award	Independent investigator with a faculty-level appointment (or equivalent).	• Letter of Intent is required. An invitation to submit a full application is not required. • Supports innovative research and high-reward concepts that span the spectrum of behavioral health science including prevention, survivorship, quality of life, and psychosocial research related to cancer. • Must address at least one of the FY21 PRCRP Topic Areas. • Must address at least one of the FY21 PRCRP Military Health Focus Areas. • Preliminary data required. • Pilot clinical trials are allowed.	Maximum funding for the entire period of performance is $1,000,000 for direct costs (plus indirect costs). Maximum period of performance is 4 years.

Career Development Award – Fellow Option	**Principal Investigator (PI):** Independent investigators at or above the level of Assistant Professor or Instructor (or equivalent) and within 7 years after completion of their terminal degree (excluding time spent in residency or on family medical leave) by the time of the application submission deadline. **Career Guide:** Investigators at or above the level of Associate Professor (or equivalent); must have a proven publication and funding record in cancer research.	• Letter of Intent is required. An invitation to submit a full application is not required. • Supports independent, early-career investigators to conduct impactful research with the mentorship of an experienced cancer researcher. • Must address at least one of the FY21 PRCRP Topic Areas. • Must address at least one of the FY21 PRCRP Military Health Focus Areas. • Preliminary data are not required. • Clinical trials are not allowed.	Maximum funding for the entire period of performance is **$400,000** for direct costs (plus indirect costs) Maximum period of performance is **3** years
Idea Award	Independent investigator with a faculty-level appointment (or equivalent).	• Preproposal is required; application submission is by invitation only. • Supports innovative, untested, high-risk/ potentially high-reward concepts, theories, paradigms, and/or methods in cancer research. • Emphasis on innovation. • Must address at least one of the FY21 PRCRP Topic Areas. • Must address at least one of the FY21 PRCRP Military Health Focus Areas. • Preliminary data are not required. • Clinical trials are not allowed.	Maximum funding for the entire period of performance is $500,000 for direct costs (plus indirect costs) Maximum period of performance is 3 years
Impact Award	Independent investigators at or above the level of Assistant Professor (or equivalent) are eligible to submit an application.	• Preproposal submission is required; application submission is by invitation only.	Maximum funding for the entire period of performance

		• Supports hypothesis-driven, high impact research. • Encourages applications that support research projects or ideas that specifically focus on critical scientific and clinical cancer issues which, if successfully addressed, have the potential to make a near term, major impact on one of the FY21 PRCRP Topic Areas. • Must address at least one of the FY21 PRCRP Topic Areas. • Must address at least one of the FY21 PRCRP Military Health Focus Areas. • Preliminary data are required. • Clinical trials are allowed.	is $1,250,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Translational Team Science Award	At least two, and a maximum of three, PIs must partner in one overarching correlative or translational research study. At least one of the PIs is encouraged to be a military or US Department of Veterans Affairs investigator.	• Letter of Intent is required. An invitation to submit a full application is not required. • Emphasizes multi-PI, multidisciplinary collaborations. • Supports translational studies associated with an ongoing or completed clinical trial that can lead to a future clinical trial or clinical application in cancer research. • Not intended to support high throughput screenings, sequencing, etc. • Must address at least one of the FY21 PRCRP Topic Areas.	Maximum funding for the entire period of performance is $2,500,000 for direct costs (plus indirect costs). Maximum period of performance is 4 years.

		• Must address at least one of the FY21 PRCRP Military Health Focus Areas. • Preliminary data are required. • Clinical trials are allowed.	

http://cdmrp.army.mil/prcrp/default

Peer Reviewed Medical Research Program (2021)

All applications submitted to the PRMRP must address at least one of the FY20 PRMRP Congressionally directed topic areas. The FY21 PRMRP Topic Areas can be found at https://cdmrp.army.mil/pubs/press/2021/21prmrppreann

Award	Eligibility	Key Elements	Funding
Clinical Trial Award	Assistant Professor level or above (or equivalent)	• Preproposal submission is required; application submission is by invitation only. • Supports the rapid implementation of clinical trials of novel interventions with the potential to have a significant impact on patient care in the topic area(s) of interest. • Proposed projects may range from small proof-of-concept trials through large-scale, definitive trials. • Two options will be offered: ○ Planning Phase with Clinical Trial Option: provides support to prepare and submit an Investigational New Drug/Investigational	Clinical Trial: • Funding limit for clinical trial not defined; requested funding must be appropriate for the scope of work proposed. • Maximum period of performance is 4 years for the clinical trial. Preclinical Planning Phase Option: • Maximum of $500,000 for direct costs (plus indirect costs) for the Preclinical Planning Phase Option. • Maximum period of performance is 18 months for the Preclinical Planning Phase Option.

		Device Exemption (IND/IDE) application to the FDA and requires FDA/regulatory approval or exemption to proceed before the Clinical Trial award is made. ○ Clinical Trial Only Option: provides support for the clinical trial. Investigational New Drug or Investigational Device Exemption applications to the Food and Drug Administration (FDA), if needed, must be approved by the FDA and included in the application submission.	
Discovery Award	Postdoctoral fellow or clinical fellow (or equivalent) and above	• Supports the exploration of a highly innovative new concept or untested theory. • Not intended to support the logical progression of an already established line of questioning. • Reviewers will be blinded to the identity of the Principal Investigator (PI), collaborators, and their organization(s). • Clinical trials will not be funded.	Maximum of $200,000 for direct costs (plus indirect costs) Maximum period of performance is 2 years
Focused Program Award	Full Professor level or above (or equivalent)	• Preproposal submission is required; application submission is by invitation only. • Supports a synergistic, multidisciplinary research program of at least four distinct	Maximum of $7.2 million for direct costs (plus indirect costs) Maximum period of performance is **4 years**

		but complementary projects addressing an overarching goal. • Projects should work together to answer critical questions, resolve differing hypotheses, and translate laboratory findings to clinical applications. • Projects may range from exploratory/hypothesis-developing through small-scale clinical trials that together will address the overarching goal/question. • Research team of highly qualified, multidisciplinary project leaders should be led by a PI with demonstrated success in directing large, focused projects.	
Investigator-Initiated Research Award	Assistant Professor level or above (or equivalent)	• Preproposal submission is required; application submission is by invitation only. • Supports research that will make an original and important contribution to the field of research or patient care in the topic area(s) of interest. • Partnering PI Option available. • Clinical trials will not be funded.	Maximum of $1.6 million for direct costs (plus indirect costs) Maximum of $2 million for direct costs (plus indirect costs) for applications including a Partnering PI Option Maximum period of performance is 4 years
Technology/ Therapeutic Development Award	Assistant Professor level or above (or equivalent)	• Preproposal submission is required; application submission is by invitation only. • Supports the translation of promising preclinical findings into clinical applications for	<u>Funding Level 1:</u> • Maximum of $2 million for direct costs (plus indirect costs). • Maximum period of performance is 4 years. <u>Funding Level 2:</u>

		prevention, detection, diagnosis, treatment, or quality of life. • Product-oriented (e.g., device, drug, clinical guidelines). The product(s) to be developed may be a tangible item such as a pharmacologic agent (drugs or biologics) or device, or a knowledge-based product. • New for FY21: Two funding levels available, depending on the maturity of the product. The following are general descriptions, although not all-inclusive, of the scope of research projects that would be appropriate to propose under each funding level: ○ Funding Level 1: Supports research that is supported by significant preliminary data but has not advanced to the level of clinical translation. ○ Funding Level 2: Supports research that is in the final states of preclinical development with potential for near-term clinical development. Applications must provide relevant data that support the rationale for the proposed study. Funding Level 2 recipients must	• Maximum of $4 million for direct costs (plus indirect costs). • Maximum period of performance is 4 years.

		submit or obtain an IND/IDE application to the FDA, or must transition the product to clinical practice, within the period of performance. • Clinical trials will not be funded.	

http://cdmrp.army.mil/prmrp/default

Peer Reviewed Orthopaedic Research Program (2021)

Applications submitted to the FY21 PRORP must address one or more of the following focus areas:

1. **Compartment Syndrome:** Novel treatment strategies to improve current diagnoses for compartment syndrome. Alternatives to intracompartmental pressure measurements are encouraged.
2. **Limb Stabilization and Protection:** Development and/or clinical assessment of rapid limb stabilization and novel wound protectants for severely wounded limbs to enable transport at the point of need.
3. **Osseointegration:** Identification of best practices to address infection, rejection, and/or failure of percutaneous osseointegrated prosthetic limbs.
4. **Retention Strategies:** Development, optimization, and/or validation of battlefield-feasible diagnostic capabilities, decision support tools, interventions, and/or rehabilitation strategies that can facilitate retention on duty for common combat-related musculoskeletal injuries. Biomarker studies are excluded. The current standard of care must be noted. The rehabilitation strategy to be used in the proposed study must be specified, as applicable.
    a. **Battlefield Care:** Strategies that can be utilized at or near the point of injury to allow an injured Service member to remain on the battlefield or on mission without the need for evacuation. Treatment strategies that allow return to mission effectiveness within 30 days will be considered.
    b. **Return to Duty:** Treatment strategies that can be utilized along the continuum of care and enable return to duty of the Service member within one year of injury.
5. **Tissue Regeneration Therapeutics:** Development of advanced tissue regeneration therapeutics in nerve, muscle, and/or composite tissue for the restoration of traumatically injured extremities. Isolated bone or cartilage tissue engineering studies are excluded. Early clinical feasibility studies involving volumetric muscle loss are encouraged.
6. **Translation of Early Findings:** Translation of early research findings in the orthopaedic surgical care topic areas listed below to move the research toward clinical trials and clinical practice.

- Soft Tissue Trauma: Strategies to develop and/or identify musculoskeletal extremity soft tissue trauma treatments for shoulder, knee, or chronic ankle instability and sequela only, to optimize return to duty, work, or reintegration.
- Fracture-Related Infection: Strategies to decrease the burden of fracture-related infections (may include prevention, early detection, or improved eradication). Alternatives to systemic and/or local antibiotic delivery are encouraged. Novel approaches that improve the current standard of treatment to prevent fracture-related infections are encouraged.

Award	Eligibility	Key Elements	Funding

Applied Research Award	Independent investigators at all academic levels (or equivalent) are eligible to submit applications.	• Pre-application is required; Full application submission is by invitation only.
		• Supports applied research applications focused on advancing optimal treatment and restoration of function for military personnel with musculoskeletal injuries sustained during combat or combat-related activities.
		• Proposed research should be supported by preliminary data and have the potential to make significant advancements toward clinical translation.
		• Clinical trials are not allowed under this award mechanism.
		• Applications must address one of the following FY21 PRORP Focus Areas:
		  ○ Limb Stabilization and Protection
		  ○ Retention Strategies
		  ○ Osseointegration
			Maximum funding of **$725,000** for total costs
			
			Maximum period of performance is **3** years

Clinical Trial Award	Independent investigators at all academic levels (or equivalent) are eligible to submit applications.	• Pre-application is required; Full application submission is by invitation only.
		• Supports rapid implementation of clinical trials with the potential to have a major impact on military combat-related orthopaedic injuries, or non-battle injuries that significantly impact unit readiness and return-to-duty/work rates
		• Funding must support a clinical trial and may not be used for preclinical research studies.
		• Collaboration with military researchers and clinicians is encouraged, but not required.
		• Investigational New Drug or Investigational Device Exemption applications, if needed, should be submitted to the Food and Drug Administration within 6 months of the award date.
		Applications must address one the following FY21 PRORP Focus Areas:
		  ○ Limb Stabilization and Protection
		  ○ Retention Strategies
		  ○ Translation of Early Findings
		• Applications submitted to the Translation of Early Findings (soft tissue trauma only) Focus Area may elect a Rehabilitation Option,
			Maximum funding of **$2.25M** for total costs. (**$2.75M** maximum total costs if requesting the Rehabilitation Option.)
			
			Maximum period of performance is **4** years

		which provides a higher funding maximum for surgical intervention studies that propose an integrative rehabilitation component.	

Clinical Translational Research Award	Independent investigators at all academic levels (or equivalent) are eligible to submit applications.	• Pre-application is required; Full application submission is by invitation only.
		• Supports high-impact and/or emerging research that may or may not be ready for a full scale randomized controlled clinical trial.
		• Funding must support clinical research studies involving humans.
		• Preliminary or published data relevant to the proposed research project are required.
		• Collaboration with military researchers and clinicians is encouraged.
		• Investigational New Drug or Investigational Device Exemption applications, if needed, should be submitted to the Food and Drug Administration within 12 months of the award date.
		• Applications must address one the following FY21 PRORP Focus Areas:
		  ○ Retention Strategies
		  ○ Tissue Regeneration Therapeutics
			Maximum funding of **$1.5M** for direct costs (plus indirect costs)
			
			Maximum period of performance is **4** years

		○ Compartment Syndrome ○ Osseointegration ○ Prosthetic and Orthotic Devices	

http://cdmrp.army.mil/prorp/default

Prostate Cancer (2020)

The mission of the PCRP is to fund research that will lead to the elimination of death from prostate cancer and enhance the well-being of Service members, Veterans, and all the men and their families who are experiencing the impact of the disease. Within this context, the PCRP is interested in supporting research that addresses specific gaps in prostate cancer research and clinical care, with an emphasis on investing in research that will benefit patients diagnosed with lethal prostate cancer or improve quality of life for men diagnosed with this disease. All applications are required to address one or more of the following FY20 PCRP Overarching Challenges:

- **Improve the quality of life for survivors of prostate cancer**
- **Develop treatments that improve outcomes for men with lethal prostate cancer**

Applications must be directly relevant to lethal prostate cancer, which includes patients with metastatic disease; treatment-resistant disease; oligo-metastases; neuroendocrine disease; high-risk localized or locoregional disease, etc.

- **Reduce lethal prostate cancer in people of African descent, Veterans, and high-risk or underserved populations**

High-risk populations include, but are not limited to, people of African descent (including Caribbean Americans), genetically predisposed populations, Service members, and Veterans. Underserved populations include, but are not limited to, men with limited access to clinical care and resources (in both rural and urban settings), and sexual and/or gender minorities with, or at risk for, prostate cancer.

- **Define the biology of lethal prostate cancer to reduce death**

Applications must be directly relevant to lethal prostate cancer, which includes patients with metastatic disease; treatment-resistant disease; oligo-metastases; neuroendocrine disease; high-risk localized or locoregional disease; etc. Applications should not focus on topics such as differentiation between low risk and intermediate risk prostate cancer.

Award	Eligibility	Key Elements	Funding
Early Investigator Research Award	**By March 31, 2021, Postdoctoral Principal Investigators (PIs):**	• Supports research opportunities focused on prostate cancer for individuals in the early stages of their careers.	• Maximum funding of $300,000 for direct costs (plus indirect costs).

	• Must possess a doctoral degree (or equivalent). • Have 3 years or less of postdoctoral research experience (excluding clinical residency or clinical fellowship training).	• PIs must have a designated mentor who is an experienced prostate cancer researcher	• Maximum period of performance is 2 years.
Health Disparity Research Award	• **Established Investigators:** Independent investigators at or above the level of Assistant Professor (or equivalent); or **New Investigators**: Investigators that meet the following criteria at the application submission deadline date: • Have the freedom to pursue individual aims without formal mentorship • Have not previously received a PCRP Health Disparity Research Award and/or Idea Development Award • Have completed at least 3 years of postdoctoral training or fellowship and are within 10 years after completion of a terminal degree (excluding residency or family medical leave)	• Supports research ideas that have the potential to make an important contribution to reducing and ultimately eliminating disparities in prostate cancer incidence, morbidity, and mortality. • Proposed projects must address one of the following health disparity focus areas: (1) access to healthcare, (2) social and cultural factors, (3) environmental factors, or (4) biological and genetic contributors. • Proposed projects may include basic, translational, population science, or clinical research, including clinical trials. • Primary emphasis will be placed on the potential impact of the proposed work. • Preliminary data are encouraged, but not required. • New Investigator Option supports applicants early in their faculty appointments or in the process of	**Established Investigators:** • Maximum funding of $750K for direct costs (plus indirect costs). **New Investigators:** • Maximum funding of $600K for direct costs (plus indirect costs). • Maximum period of performance is 3 years

		developing independent research careers.	
Physician Research Award	At the time of application submission, the PI must be either: • In the last year of an accredited medical residency or medical fellowship program; ***or*** • Within 5 years of having initiated a faculty appointment (including Instructor positions).	• Supports mentored research experience to prepare physicians with clinical duties for careers in prostate cancer research. • PIs must demonstrate a commitment to a career at the forefront of prostate cancer research and clinical practice. • PIs must have a designated mentor with an established research program in prostate cancer.	• Maximum funding of $750K for direct costs (plus indirect costs) • Maximum period of performance is 4 years
Idea Development Award	**Established Investigators:** Independent investigators at all levels or **New Investigators:** Investigators that meet the following criteria at the application submission deadline date: • Have the freedom to pursue individual aims without formal mentorship. • Have not previously received a PCRP Idea Development Award and/or Health Disparity Research Award. • Have either completed at least 3 years of postdoctoral training or	• Supports new ideas that represent innovative, high-risk/high-gain approaches to prostate cancer research and have the potential to make an important contribution to one or more of the FY20 PCRP Overarching Challenges. • Emphasis is equally placed on Innovation and Impact. • Preliminary data are encouraged, but not required. • Clinical trials are not allowed. • Each PI may submit only one application.	Established Investigators: • Maximum funding of $750,000 for direct costs (plus indirect costs). New Investigators: • Maximum funding of $600,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

	fellowship or are within 10 years after completion of terminal degree (excluding residency or family leave).	• New Investigator Option supports applicants early in their faculty appointments or in the process of developing independent research careers.	

Translational Science Award	Independent investigators at all levels.	• Supports advanced pre-clinical studies that will develop promising ideas with demonstrated clinical relevance in prostate cancer into clinical applications.
		• Supports a broad range of translational studies such as:
		  ○ Translation of results from animal studies to applications with human samples/cohorts.
		  ○ Late-stage preclinical work leading to/preparing for a clinical trial, e.g., Investigational New Drug (IND) application submission.
		  ○ Correlative studies that are associated with an open/ongoing or completed clinical trial.
		  ○ Projects that develop endpoints for clinical trials.
		• Preliminary data required.
		• NEW Partnering PI Option: Allows two PIs, termed Initiating and Partnering PIs, to collaborate on a
			• Maximum funding of $1M for direct costs (plus indirect costs).
			• Maximum period of performance is 3 years.

		single application. Multidisciplinary collaborations are encouraged.	
Clinical Trial Award	Independent investigators at all levels	• Supports hypothesis-based, early-phase clinical trials (e.g., Phase 0, Phase I, pilot Phase II) to test interventions that will have a major impact on one or more of the FY20 PCRP Overarching Challenges. • Interventions may include drugs, devices, biologics, surgical procedures, behavior modifications, or other types. • Investigational New Drug or Investigational Device Exemption approvals, if applicable, must be in place by the time of application submission. • Letter of support to demonstrate proof of possession of sufficient drug supply to conduct study must be provided (if appropriate). • Clinical trials are expected to be initiated within 12 months of the award date	• Maximum funding of $2,000,000 for direct costs (plus indirect costs). • Maximum period of performance is 4 years.
Population Science and Outcomes Research Award	Independent investigators at all levels.	• Supports population-focused studies that will, if successful, identify and understand predictors of lethal prostate cancer or survivorship within the context of the FY20 PCRP Overarching Challenges. • Examples of appropriate research approaches include:	• Maximum funding of $1M for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

		○ Retrospective data analysis of patient databases or biospecimens. ○ Prospective observations, analyses, or sample collection from a patient population. ○ Case-control, cohort, or other population science study designs. • Clinical trials are not allowed. • Research ideas may include, but are not limited to, biomarkers for lethal disease; genetics/genomics; therapy and predictors of response or resistance; survivorship; and health disparity. • Requires demonstration of sufficient sample size to address the study objectives, a robust statistical plan, and strong biostatistical expertise in the study team. • Presentation of preliminary data is strongly encouraged, but not required.	
Clinical Consortium Award	Independent investigators with a faculty-level appointment (or equivalent).	• Supports a consortium consisting of 1 coordinating center and 10 clinical research sites that will facilitate the rapid execution of collaborative Phase II or Phase I/II clinical trials that will bring to market high-impact, novel therapeutic interventions that	**Coordinating Center:** • Maximum funding of $7,200,000 for direct costs (plus indirect costs), including no less than $500,000 per year for

		will significantly decrease the impact of prostate cancer. • The coordinating center and clinical research sites will be jointly responsible for proposing, selecting, and conducting trials. • Funds may not be used for research or development of clinical protocols. • Significant emphasis is placed on the inclusion of patients from diverse populations, particularly those from high-risk (e.g., men of African descent, Caribbean Americans), underserved (e.g., men with limited access to clinical care and resources in rural or urban settings), and/or military populations (Service member and Veterans). • Coordinating Center applications will identify two or more Affiliate Clinical Research Sites to be supported and managed by the Coordinating Center that must specialize in the recruitment of patients from the emphasized populations. • Clinical Research Sites must provide plans for accruing patients from diverse patient populations.	support of two or more Affiliate Clinical Research Sites. • Maximum period of performance is 4 years. **Clinical Sites:** • Maximum funding of $1,000,000 for direct costs (plus indirect costs). • Maximum period of performance is 4 years.

Prostate Cancer Pathology Resource Network Award	Independent investigators with a faculty-level appointment (or equivalent) with access to the appropriate facilities.	• Provides infrastructure support for the development and maintenance of a prostate cancer biorepository through a collaborative network across multiple institutions that will facilitate the collection, processing, annotation, storage, and distribution of high-quality human prostate cancer biospecimens. • Each application must include one Coordinating Center and three to five Pathology Resource Sites (including one at the Coordinating Center), all of which will be jointly responsible for development of the biospecimen repository. • Major emphasis for biospecimen collection must be placed on the acquisition and distribution of biospecimens in limited supply in the prostate cancer research community. • In addition to sample collection, the consortium is expected to be a repository for the collection and distribution of molecular data generated from the biospecimens, such as digital images and blood-based germline assessments. • Each application must include plans for significant accrual from	• Maximum funding of $6.0M for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

		at least one Pathology Resource Site of patient samples from populations that are disproportionately affected (African Americans, African-descent, Veterans, etc.) and underserved (uninsured, rural communities, etc.). • Sites must provide plans for scalable management operations, quality assurance, bioinformatics and data management, and ethical and regulatory issues. • Applications should clearly describe benchmarks for utilization of the repository as well as mechanisms for outreach to increase use by the prostate cancer community.	

http://cdmrp.army.mil/pcrp/default

Rare Cancers (2020)

Award	Eligibility	Key Elements	Funding ($)
Concept Award	Investigators at all academic levels.	• Supports innovative, high-risk/high-reward research that is in the earliest stages of idea development or an untested theory that addresses an important problem related to rare cancers. Proof-of-concept is the anticipated outcome. • Submission should address at least one of the FY20 Focus Areas. • Reviewers will be blinded to the identity of the Principal Investigator (PI), collaborators, and their organization(s). • Preliminary data are not required.	Maximum funding of $100,000 for direct costs (plus indirect costs). Maximum period of performance is 1 year.

		• Clinical trials are not allowed.	
Idea Development Award	Independent investigators with a faculty-level appointment	• Supports innovative, high-risk/high-reward research with the potential to yield impactful data in the rare cancer field. • Preliminary data with disease specific rationale are required (correlatives in existing trials). • Submission of a Letter of Intent is required prior to full application submission. • Submission should address at least one of the FY20 Focus Areas. • Clinical trials are not allowed.	Maximum funding of $350,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Resource and Community Development Award	Independent investigators with a faculty-level appointment	• Emphasis on research resources development to bring together researchers, clinicians, patients, and patient advocates. • Supports research development or infrastructure that can be applied to multiple rare cancers. • Translational research and clinical studies may be included. • Submission should address the Platform Development Focus Area. • Preliminary data are not required. • Clinical trials are not allowed.	Maximum funding of $600,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

https://cdmrp.army.mil/pubs/press/2020/20rcrppreann

Reconstructive Transplant Research Program (2020)

Applications must address at least one of the FY20 RTRP Investigator Initiated Research Award Focus Areas:

- Reduce the risks of VCA-associated immunosuppression
  - Define the unique mechanisms of VCA immunogenicity.
  - Develop novel approaches for improving VCA immune tolerance.
  - Identify unique immunosuppression requirements for VCA compared to other solid organ transplants.

- **Develop reliable non-invasive methods or tools for monitoring VCA graft rejection**
  - Develop reliable non-invasive biomarkers for monitoring chronic VCA graft rejection in a large animal model

- Identify and/or validate new peripheral biomarkers for acute and chronic rejection
- Develop assays or devices for clinical graft monitoring utilizing validated biomarkers

- **Advance existing or develop innovative ex vivo tissue preservation strategies to extend the timeline between procurement and transplantation**
  - Develop novel approaches and models for perfused, hypothermic, high subzero and low subzero, or static preservation strategies
  - Determine the extent to which VCA tissue preservation technology impacts VCA immunogenicity

Award	Eligibility	Key Elements	Funding ($)
Investigator-Initiated Research Award	Independent investigators at all academic levels (or equivalent)	• Supports studies with the potential to make an important contribution to the reconstructive transplant research field, patient care, and/or quality of life. • Preproposal is required; full application submission is by invitation only. • Preliminary or published data are required. • Multiple PI Option supports synergistic partnerships among two to four investigators collaborating on a single application; multi-institutional collaborations are encouraged.	**Individual PIs:** • Maximum funding of $1 million (M) for total costs • Maximum period of performance is 3 years **Multiple PI Option:** • Maximum funding of $1.5M for total costs • Maximum period of performance is 3 years

http://cdmrp.army.mil/rtrp/default

Scleroderma (2020)

Applications submitted to the FY20 SRP Idea Development Award must address one or more of the following Focus Areas:

- Development of clinical trial platforms that enable the rapid comparison of different therapeutic approaches on a pilot basis
- Define biomarkers ('omics and/or molecular markers, cell subsets, imaging, patient-reported outcomes) that help inform choice therapeutics (immunosuppressive/anti-fibrotic) or predict course (morbidity, mortality) and quality of life
- Secondary analysis of genomics and other datasets (scleroderma and datasets from other similar diseases), integration to identify novel targets and biomarkers to create a more analyzable set of data that can be validated in existing or new models

Applications submitted to the FY20 SRP Translational Partnership Research Award must address one or more of the following Focus Areas:

- Understanding the different biological/metabolic pathways that differentiate subsets of patients (gender, age, genetic, clinical phenotype, race/ethnicity)
- Utilizing systems biology and multi-omics approaches for understanding disease heterogeneity, primary prevention, therapeutics, interventions, and screening
- Development of cohorts from diverse populations (longitudinal) to validate potential biomarkers (i.e., replication studies)
- Define biomarkers ('omics, and/or molecular markers, cell subsets, imaging, patient-reported outcomes) that help inform choice of therapeutics (immunosuppressive/anti-fibrotic) or predict course (morbidity, mortality) and quality of life
- Defining epigenetic changes, multiple cell types, and molecules that mediate pathogenesis

Award	Eligibility	Key Elements	Funding ($)
Idea Development Award	Investigators at all academic levels (or equivalent). New Investigators: Terminal degree must be within the last 10 years. Must not have received National	• Supports conceptually innovative, high-risk/ potentially high-reward research that could ultimately lead to critical discoveries and/or improvements in patient care and/or quality of life. • Innovation and impact are important aspects of the award. • Clinical trials are not allowed. • Preliminary data are required. • New Investigator Collaboration Option: Supports the continued development of promising independent investigators that are early in their faculty appointment through collaboration with an established scleroderma investigator.	Maximum funding of $300,000 for direct costs (plus indirect costs). **New Investigator Collaboration Option** Maximum funding of $450,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

	Institutes of Health R01 funding. Must not have received a New Investigator Award previously from any program within the CDMRP.	• Submission of a preproposal is required; application submission is by invitation only.	
Translational Research Partnership Award	Investigators above the level of post-doctoral fellow (or equivalent). Clinicians must be an M.D., M.D./Ph.D, or equivalent with clinical duties and/or responsibilities. *New Investigators:* Terminal degree must be within the last 10 years. Must not have received National Institutes of Health R01 funding.	• Supports partnerships between clinicians and laboratory scientists that accelerate ideas in scleroderma into clinical applications. At least one partner must be a laboratory scientist and at least one partner must be a clinician. • One investigator must be a New Investigator. • Preliminary data are required. • Clinical trials are not allowed. • Submission of a preproposal is required; application submission is by invitation only.	Maximum funding of $750,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.

	Must not have received a New Investigator Award previously from any program within the CDMRP.		

Spinal Cord Injury Research Program (2021)

Applications submitted to the FY21 SCIRP must address one or more of the following focus areas*:

- Psychosocial issues relevant to people with SCI, their families, and/or their care-partners
- Preserving and protecting spinal cord tissue at time of injury for improved neurologic outcomes
- Identifying and validating biomarkers for diagnosis, prognosis, and for evaluation of treatment efficacies
- Bowel, genitourinary, cardiopulmonary dysfunction, and neuropathic pain
- Rehabilitation and regeneration—maximizing the function of the residual neural circuitry, including harnessing neuroplasticity and recovery to improve function after SCI

Award	Eligibility	Key Elements	Funding ($)
Clinical Trial Award	Investigators at all academic levels Optional Partnering Investigator: An independent, early-career investigator within 10 years after	• Preproposal is required; application submission is by invitation only. • Fund Phase 0, I, or II clinical trials with the potential to have a major impact on treatment or management of SCI and its consequences. • Alternative study designs to traditional randomized clinical trials are allowed but should be appropriate to the objective of the trial. • Applications must include at least two individuals with lived SCI experience as members of the research team. • Preclinical data required for all clinical trial applications	Maximum funding of $3M for direct costs (plus indirect costs). Maximum period of performance is 4 years.

	completion of terminal degree		
Investigator-Initiated Research Award	Investigators at all academic levels Optional Partnering Investigator: An independent, early-career investigator within 10 years after completion of terminal degree	• Preproposal is required; application submission is by invitation only. • Fund SCI-related research that has the potential to make an important contribution to SCI research, patient care, and/or quality of life. • Studies focused exclusively on target identification are discouraged. • Preliminary data required. • Clinical trials are not allowed.	Maximum funding of $500,000 for direct costs (plus indirect costs). Maximum period of performance is 3 years.
Translational Research Award	Investigators at all academic levels Optional Partnering Investigator: An independent, early-career investigator within 10 years after completion of terminal degree	• Preproposal is required; application submission is by invitation only. • Fund studies that accelerate the movement of promising ideas in SCI research into clinical applications. • Applications must include at least one individual with lived SCI experience as a member of the research team. • Preliminary data required. • The SCIRP Translational Research Award may include a pilot clinical trial as part of the proposed research where limited clinical testing of a novel intervention or device is necessary to inform the next step in the continuum of translational research.	Maximum funding of $1.25M for direct costs (plus indirect costs). Maximum period of performance is 3 years.

http://cdmrp.army.mil/scirp/default

Tick-Borne Disease Research Program (2021)

Applications submitted to the FY21 TBDRP must address one or more of the following Focus Areas:

- **Diagnosis**
  - Development of direct detection diagnostic assay for agents of Lyme and/or other tick-borne diseases (TBDs).
  - Diagnostic biomarker panel for Lyme disease and/or other TBDs that distinguishes tick-borne (TB) infection from other febrile illnesses.

    - Approaches capable of distinguishing active infection and previous exposure, and/or monitoring response to treatment.
    - Innovative approaches that provide diagnosis for a single or multiple TB infections.
- **Treatment**
    - Novel therapeutic strategies for acute and persistent TBDs.
    - Potential treatments designed to mitigate development of long-term sequelae following infection with bacterial, parasitic, or viral TB agents.
    - Translational approaches that bridge basic biology to the development of potential treatments.
- **Prevention**
    - Drugs, antibodies, vaccines, or other novel approaches that can be administered and/or utilized prophylactically to prevent human TBD.
    - Identification, validation, and/or improvement of tick- or reservoir-targeted prevention and control interventions that are safe and non-toxic to non-target species.
    - Understanding the ecology of understudied TBD vectors and reservoirs with emphasis on how it relates to human risk.
- **Pathogenesis**
    - Pathogenesis of persistent clinical manifestations associated with Lyme disease.
    - Immune evasion and/or tolerance of TB pathogens (Lyme and/or other TBDs).
    - Effects of tick sialome on human infection, immune response, disease progression, and pathogen dissemination.
    - TB infections and co-infections (simultaneous or sequential) and their effects on human disease severity, the local and systemic immune response, or pathogen synergy and competition.
    - Pathogenesis of mammalian meat allergy (allergic response to galactose-alpha-1,3-galactose (alpha-gal)).
    - Understanding the potential role of maternal-fetal transmission and the ability to prevent TBDs by this mode of transmission.

Award	Eligibility	Key Elements	Funding
Idea Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• To fund research that could lead to impactful discoveries or major advancements that will accelerate progress in improving outcomes for individuals affected by Lyme diseases and/or other TB illnesses. • Research should be conceptually innovative, exhibit high levels of creativity, or challenge existing research paradigms. • Applications must describe the short- and long-term	Maximum funding of **$600K** for direct costs (plus indirect costs). Maximum period of performance is **3** years

		impact of the proposed research, as well as the public health burden of the diseases being addressed. • Preliminary data is encouraged, but not required. • Clinical trials are not allowed; human studies/clinical research are permitted. • Preproposal is required; application submission is by invitation only.	
Career Development Award	**Principal Investigator (PI):** Investigators within 10 years of completing terminal degree (excluding time in medical residency or on family medical leave) at the time of application submission, working to become independent investigators who exhibit a strong desire to pursue careers in tick-borne disease research; time spent as a postdoctoral fellow is *not* excluded **Mentor:** Independent investigators at or above the level of Associate Professor (or equivalent); must be an experienced tick-borne diseases researcher as demonstrated by a recent (last 5 years) history of funding and publications in tick-borne diseases research, specifically in the field (pathogen and associated methods) of the proposed studies.	• To fund early-career investigators to conduct impactful research under the mentorship of an experienced TBD researcher. • Career Development Plan is required for invited application submission. Plan should be prepared with appropriate guidance from the Mentor, should clearly articulate a strategy for acquiring the necessary skills, competence, and expertise to establish a career at the forefront of TBD research, and should outline how the PI will gain experience in TBD research. PI's institution must demonstrate a commitment to the PI through a minimum of 75% protected research time for TBD research. The application must include clearly stated plans for	Maximum funding of **$300K** for direct costs (plus indirect costs). Maximum period of performance is **3** years.

	The PI and Mentor may be at different organizations.	interactions and communication coordination between the PI and Mentor. • Mentorship is required. • Preliminary data is encouraged, but not required. • Clinical trials are not allowed; human studies/clinical research are permitted. • Preproposal is required; application submission is by invitation only.	

http://cdmrp.army.mil/tbdrp/default

Tuberous Sclerosis Complex Research Program (2021)

Applications submitted to the FY21 TSCRP are encouraged to address one or more of the following Focus Areas:

- Eradicating tumors associated with TSC and TSC-associated lymphangioleiomyomatosis (LAM), including gaining a deeper mechanistic understanding of TSC signaling pathways
- Preventing epilepsy, improving treatment, and mitigating comorbidities associated with TSC-related seizures
- Understanding the features of TSC-Associated Neuropsychiatric Disorders (TAND) and reducing their impact through pharmacological or nonpharmacological interventions

Award	Eligibility	Key Elements	Funding
Exploration - Hypothesis Development Award	Investigators at or above postdoctoral fellow (or equivalent).	• Supports the initial exploration of innovative, high-risk, high-gain, and potentially groundbreaking concepts in the TSC research field. • Projects involving human subjects or human biological substances must be exempt under 32 CFR 219.101(b)(4) or eligible for	• Maximum funding of $150,000 for direct costs (plus indirect costs). • Maximum period of performance is 2 years.

		expedited review under 32 CFR 219.110 or 21 CFR 56.110. • Preliminary data are not required. • Research projects must be innovative, feasible, and supported by a strong rationale. • Innovation is an important review criterion. • Clinical trials are not allowed.	
Idea Development Award	***Established Investigators***: Independent investigators at or above the level of Assistant Professor (or equivalent); **or** ***New Investigators***: Independent investigator at or below the level of Assistant Professor (or equivalent); or Established independent investigator in an area other than TSC at or above the level of Assistant Professor seeking to transition to a career in TSC thereby bringing his/her expertise to the field. Must not have received more than $300,000 in total direct costs for previous or concurrent TSC research as a PI of one or more Federally funded, non-mentored peer-reviewed grants. (National Institutes of Health K/R00 Awardees are eligible to apply.) Must not have received a New	• Supports new ideas that have the potential to yield high-impact findings and new avenues of investigation. • Preliminary data are expected. • Impact and Innovation are important review criteria. • Clinical trials are not allowed. • New Investigator Option supports the continued development of promising independent investigators and/or the transition of established investigators from other research fields into a career in TSC research. • Applications from New Investigators and Established Investigators will be peer- and programmatically reviewed separately.	• Maximum funding of $500,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

	Investigator Award previously from any program within the CDMRP.		
Clinical Translational Research Award	Independent investigators at or above the level of Assistant Professor (or equivalent)	• Supports studies that will move promising, well-founded preclinical and/or clinical research findings closer to clinical application, including diagnosis, prognosis, or treatment of TSC. • Preference will be given to studies that involve human samples, patients, or leverage existing clinical data and/or ongoing clinical studies. • Applications may include a small, pilot clinical trial intended to inform the next step in the continuum of translational research. • Preclinical studies may be appropriate but must include a clinical component. • Projects that are exploratory and/or strictly animal research will not be considered for funding. • Clinical Translational Potential is the most important review criterion. • Preliminary data are required.	• Maximum funding of $750,000 for direct costs (plus indirect costs). • Maximum period of performance is 3 years.

http://cdmrp.army.mil/tscrp/default

Vision Research Program (2020)

Applications submitted to the FY20 VRP must address at least one of the following Focus Areas:

- Eye injury or visual dysfunction as related to a military-relevant traumatic event. Examples of military-relevant trauma may include, but are not limited to:
  - Blast, penetrating, blunt, thermal, or chemical trauma
  - Trauma caused by directed energy weapons such as laser, high-power microwaves, and particle beams
- Diagnosis, stabilization, and treatment of eye injuries in austere environments and prolonged field care settings
- Restoration of visual function after trauma-related vision loss or severe visual impairment

Award	Eligibility	Key Elements	Funding ($)
Focused Translational Team Science Award (FTTSA)	Overall Lead Principal Investigator (PI) must be an independent investigator at or above the level of Associate Professor (or equivalent) with experience in developing and running large-scale initiatives. Leaders of individual projects may be independent investigators at all academic levels (or equivalent).	**Preproposal is required; application submission is by invitation only** • Supports a team initiative that leverages the strengths of investigators specializing in different fields to address an overarching scientific challenge or question and fundamentally advance the understanding and treatment of military-relevant vision trauma. **Overarching Challenge** Investigators are encouraged to: • Consider barrier(s) to and/or gap(s) in the understanding, prevention, diagnosis, mitigation, and/or treatment of eye injury or visual dysfunction associated with a military-relevant trauma and envision what may be achievable in 10 to 15 years. • Identify, based on the long-term vision, what should and can be achieved in the near term. • Design projects and research teams around these considerations. **Research Projects** • The team science proposal shall include at least three (3) but no more than five (5) distinct research projects that together form a concerted and	Maximum funding of $5.0M for direct costs (plus indirect costs) Maximum period of performance is 4 year

		synergistic effort that advances a solution beyond what would be possible through individual efforts. • Preliminary data to support the feasibility of each project are required. • May include, as a portion of the proposed research, a pilot clinical trial component that collects preliminary data to support the feasibility, rationale, and design of subsequent clinical trials. **Research Team** • The overall lead PI must have demonstrated success in leading large collaborative research projects. • The overall lead PI must devote a minimum of 20% effort. • Project leader of each of the complementary and synergistic research projects must be an independent investigator with strong qualifications. • Must have a detailed Implementation Plan for participating research groups to coordinate efforts, facilitate collaboration, and create synergy.	

Investigator Initiated Research Award (IIRA)	Independent investigators at all academic levels (or equivalent)	**Preproposal is required; application submission is by invitation only.**
		
		• Supports studies that will yield highly impactful discoveries or major advancements in research and/or patient care.
		• **Funding Level 1** supports exploratory, high-risk/high-reward research in the earliest stages of development.
		  ○ Research must have the potential to yield new avenues of investigation, such as new approaches, new research tools, or new paradigms.
		  ○ While no preliminary data is required, applicants must provide solid rationale of the research idea. The investigating team must have sufficient expertise to test the idea.
		  ○ Applications in the following areas are encouraged:
		  ▪ Pathobiology underlying TBI-associated visual dysfunction.
		  ▪ Assessment, diagnosis, or treatment in prolonged field care settings.
			Funding Level 1:
			
			Maximum funding of $260,000 for direct costs (plus indirect costs).
			
			The maximum period of performance is 2 years.
			
			Funding Level 2:
			
			Maximum funding of $750,000 for direct costs (plus indirect costs).
			
			The maximum period of performance is 3 years.

		▪ Mechanism of injury for visual system trauma secondary to directed energy. • **Funding Level 2** supports the advancement of more mature research that has the potential to make significant advancements toward clinical translation. o Preliminary data supporting the readiness and feasibility of the proposed research is required. • PI is responsible for selecting the funding level that is most appropriate for the research proposed. The funding level should be selected based on the stage of the research project, rather than the amount of the budget. • Clinical trials are not allowed.	
Translational Research Award (TRA)	Independent investigators at all academic levels (or equivalent).	**Preproposal is required; application submission is by invitation only.** • Supports translational research that moves promising laboratory research into clinical applications. • It is expected that an IND or IDE application will be submitted during or by the end of the period of performance. • Preliminary data are required. • May include, as a portion of the proposed research, a pilot clinical trial component that collects preliminary data to inform the feasibility, rationale, and design of subsequent clinical trials.	Maximum funding of $1,000,000 for direct costs (plus indirect costs). The maximum period of performance is 3 years.

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