

Spring 2011 Resident Research Funding (RRF) Program

Application Form

Application instructions.

Please read and follow the following instructions carefully to ensure that you submit an accurate and complete application.

1. Carefully review the program requirements before you begin: <http://ctsi.ucsf.edu/funding/funding-for-residents#funding>.
2. You can complete a partial application and save and return to it later, but the application must be submitted **WITHIN 7 DAYS** of beginning it. To save the application and resume later, click "Save Answers and Resume Later." You will receive a URL that you will need to save on your computer so that you may return to your partially completed application. Note that the URL takes you back to the first page (this one) of the application. To get to where you wish to resume completing the application, use the NEXT buttons at the bottom of the page. NOTE: THE APPLICATION SOFTWARE DOES NOT SAVE ANY OF YOUR PDF ATTACHMENTS THAT YOU UPLOAD IF YOU CHOOSE TO "SAVE ANSWERS AND RESUME LATER".
3. Given the limitation that you must complete the application within 7 days, we suggest that you print the PDF version of the application form posted on the program website to review what is required in the application and have everything on hand that you need to complete the application ahead of time. For example, you will want to create PDF documents for any parts of the application that may require you to upload a PDF (e.g. your biosketch, letters of support, research plan, etc).
4. Only PDF formatted documents (no MS Word, Excel, PPT, etc) may be uploaded to the application. Be sure that the PDF attachments are not password protected or secured.
5. Before you submit your application, we suggest that you use the "Previous" and "Next" buttons at the bottom of the pages to review your application for accuracy. You won't be able to submit the application if required elements are missing.
6. You are only allowed to submit the application once per primary email address. You are responsible for submitting a complete and accurate application. You will receive an email confirmation including a copy of your submitted application. If you discover that you have made a major error after submitting your application, please notify Christian Leiva at cleiva@psg.ucsf.edu. Note that changes will be at the discretion of the PROGRAM and must be completed by the deadline.
7. The deadline for this application is Sunday, April 17, 2011.

Save Answers and Resume Later

Progress

Next »

APPLICANT INFORMATION

First Name *

Franceco

Last Name *

Verdi

Middle Initial

Home Address *

123 Main Street

San Francisco

California



94111

City

State

Zip Code

Department or Division Office Address *

400 Parnassus, Room S-123

San Francisco

California



94143

City

State

Zip Code

Primary Email Address *

francesco.verdi@ucsf.edu

(UCSF email or other primary email address)

Alternate Email Address *

FranklyGreen@gmail.com

(personal email or other alternate email different from above)

UCSF Box Number *

1098

Home Telephone

Office Telephone *

(415) 555-1234

Mobile Telephone *

(415) 555-5678

Fax

Resident Post-Graduate Year (PGY) *

2

« Previous

Home Address and Telephone *

Program

Next »

APPLICANT DEMOGRAPHIC INFORMATION

Gender *

- Female
 Male

Date of Birth *

08 25 1987 

Are you Hispanic (or Latino)? *

- Yes
 No
 Do not wish to provide

What is your racial background? *

- American Indian or Alaska Native
 Native Hawaiian or other Pacific Islander
 Asian
 Black or African American
 White
 Do not wish to provide

check all that apply

Have you successfully completed Designing Clinical Research (DCR) for Residents and Students (Epi 150.03) or Designing Clinical Research (Epi 202)? *

- Yes
 No

If so, when? *

07 15 2010 

If so, who was your Small Group Leader? *

Kyle Takanawi

Have you applied for Resident Research Funding (RRF) previously from the CTSI Resident Research Training Program (RRTP)? *

- Yes
 No

Have you applied to other funding sources for the current project? *

- Yes
 No

« Previous

Home Applicant and Resident Info

Progress

Next »

RESIDENCY PROGRAM DIRECTOR'S INFORMATION

Please list the following information about your Residency Program Director

Program Director's First Name *

Gwendolynn

Program Director's Last Name *

Castillo-Nassir

Program Director's Department *

Radiation Oncology

Program Director's Division

Gerontology

Program Director's Email *

gwen.castillo@ucsf.edu

Program Director's Primary Telephone *

(415) 555-8345

« Previous

Save Answers and Resume Later

Next »

Progress

MENTORS' INFORMATION

Please list the following information about your Lead/Scholarly Mentor and up to 2 Co-Mentors

Lead Mentor's First Name *

Lead Mentor's Last Name *

Lead Mentor's Title *

- Assistant Professor
 Associate Professor
 Professor
 Other:

Lead Mentor's Institution *

- UCSF
 Other:

Lead Mentor's Email *

Lead Mentor's Primary Telephone *

Lead Mentor's Role *

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Pellentesque non nisi quis ante commodo scelerisque in vel felis. Lorem ipsum dolor sit amet, consectetur adipiscing elit. Nunc quis egestas quam. Aliquam id orci odio, vel gravida lorem. Horbi accumsan vehicula accumsan. Curabitur leo orci, commodo at placerat eu, porttitor a lectus. Mauris vitae pharetra nisi. Aliquam leo libero, blandit in auctor non, congue ac elit. Donec imperdiet venenatis massa non mollis. Nullam pulvinar euismod malesuada. Donec magna urna, consectetur quis eleifend et, sollicitudin sed augue. Duis a feugiat sapien. Vivamus scelerisque lobortis ligula, quis elementum ante cursus commodo. Vestibulum felis nisi, sollicitudin vel congue vitae, gravida vel ipsum. Pellentesque eget diam nec massa sollicitudin vulputate at sit amet turpis.

In facilisis faucibus elit, ut condimentum eros commodo ac. Mauris at dolor et ante placerat pharetra. Praesent ultrices tortor in tortor fringilla facilisis hendrerit sem luctus. Donec quis dui vel arcu viverra

Describe your mentor's role in the project and in your career development. Please limit your answer to 1500 characters (approximately half a page).

« Previous

Next »

RESEARCH PROJECT INFORMATION

Proposed Research Project Title*

The Effects of Variegated Species Among the Environmental A

(60 characters)

Research Proposal*

Mulla facilisi. Maecenas tempor elementum porta. Aenean vel fringilla diam. Mulla nec risus nisi. Donec at commodo mauris. Fusce tincidunt, elit hendrerit tristique sagittis, erat tortor bibendum urna, non egestas arcu eros accumsan odio. Fusce eleifend orci eget nisl interdum vel facilisis metus elementum. Cras varius, massa dictum vestibulum adipiscing, nisi arcu blandit orci, et facilisis quam metus nec ante. Horbi ullamcorper dictum posuere. Maecenas nisi tellus, consequat et tincidunt non, venenatis et lectus. Cras vulputate dapibus dapibus. Maecenas nisl nibh, luctus et cursus sed, scelerisque sed nulla. Donec eu nunc dui, quis varius lectus. Mulla lacinia facilisis vestibulum. Proin bibendum sapien sit amet nisi consectetur sed faucibus risus malesuada. Pellentesque tincidunt sollicitudin magna. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Nam posuere sapien eget massa venenatis condimentum. Horbi magna felis, interdum vel porta et, varius placerat nibh.

Horbi volutpat dapibus orci. Duis rutrum euismod diam, sed bibendum ipsum ultricies vel. In vitae urna diam, sed bibendum massa. Fusce egestas felis nec lorem feugiat facilisis. Pellentesque rutrum risus quis nibh gravida quis aliquam tortor ornare. Cras lacinia quam eget metus tempus condimentum. Donec adipiscing accumsan neque vel blandit. Horbi rhoncus

2899

The proposal should include a very brief description of the background and significance, specific aim(s), study design, population, sample size calculation, methods (e.g. participant recruitment and measurements), and planned analyses. Please limit your answer to 4500 characters (approximately a page and a half).

Literature Cited*

Kean, Rita, LuAnn Gaskil, Larry Leistriz. "Effects of community characteristics, business environment, and competitive strategies on rural retail business performance." *Journal of Small Business Management* 36.2 (1998): 45-57. Wilson OmniFile Full Text, Mega Edition. Web. 10 Jan. 2005.

Kean, Rita, LuAnn Gaskil, Larry Leistriz. "Effects of community characteristics, business environment, and competitive strategies on rural retail business performance." *Journal of Small Business Management* 36.2 (1998): 45-57. Wilson OmniFile Full Text, Mega Edition. Web. 10 Jan. 2005.

Kean, Rita, LuAnn Gaskil, Larry Leistriz. "Effects of community

Up to five references.

Timeline and Milestones*

June 2011

- Lorem ipsum dolor sit amet, consectetur adipiscing elit.
- Pellentesque varius justo eget nunc volutpat pulvinar.

August 2011

- Etiam laoreet ipsum vel justo mollis ac malesuada nibh rhoncus.

mid-September 2011

- Curabitur quis purus non risus sagittis cursus.
- Mulla molestie sodales dolor, vestibulum pellentesque erat ornare et.
- Cras tristique quam sit amet tellus posuere nec mollis diam semper.

February 2012

- Horbi condimentum magna ut sapien rhoncus ac malesuada neque faucibus.
- Sed ultricies risus id quam condimentum nec dapibus ipsum dapibus.

628

Please limit your answer to 1500 characters (approximately half a page).

HUMAN SUBJECTS

Will human subjects be used? *

- Yes
 No
 N/A

CHR approval obtained: *

- Yes
 No
 N/A

If Yes, CHR Date of Approval: *

03 05 2010

If Yes, CHR Approval Number *

Pending

Note "Pending" if a number has not been obtained.

PROPOSED BUDGET

May request up to \$2,000 from the Resident Research Funding (RRF) Program.

Personnel *

\$ 400

e.g. Data Analysis

Consultation Fees *

\$ 450

e.g. CTSI Consultation Services

Supplies and Expenses *

\$ 375

e.g. Lab Supplies and Lab Tests

Equipment *

\$ 675

Project-Related Travel *

\$ 0

Not to be used to attend and/or present abstracts at scientific meetings. See Resident Research Travel (RRT) Program for separate application.

Other *

\$ 0

If none, put 0.

Specify Other:

Total requested from RRF *

\$ 1900

Total amount of project funding if it exceeds \$2,000:

\$ 8000

Total of ALL expenses, not only what is being requested.

Budget Details and Justification *

Donec auctor venenatis sagittis. Nullam quis iaculis sapien. Suspendisse gravida nisi molestie metus blandit vel viverra arcu consectetur. Nam vitae libero erat. Sed lacinia consectetur facilisis. Nam laoreet suscipit erat, non mattis arcu ultrices eu. Praesent hendrerit porttitor nisi ut adipiscing. Nullam varius dapibus ornare. Vivamus aliquet volutpat quam quis ornare. Sed interdum tempus diam, eu ornare purus pretium at. Aliquam quis ipsum vel odio tincidunt suscipit. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Nulla facilisi. Cras mi turpis, tristique ut sollicitudin congue, sagittis sit amet dolor.

Ut mauris odio, dapibus vitae viverra vel, lacinia eget velit. Aliquam vulputate massa id justo dictum feugiat. Proin commodo consequat odio, ac acelerisque arcu rhoncus vitae. Praesent vulputate lorem in elit venenatis iaculis. Vivamus quam turpis, accumsan eu mattis ac, malesuada ac nisi. Nam sollicitudin urna vel turpis dignissim rhoncus. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Aliquam eu elit ut purus hendrerit vestibulum. Integer ut aliquam dui. Etiam et

Provide a justification for the requested budget. If project requires over \$2,000 please indicate the source(s) of supplemental funds. Please limit your answer to 1500 characters (approximately half a page).

ATTACHMENTS

All attachments must be in .pdf format.

CV

M:\My Documents\P - PUP\PUP 2

Please upload your current academic CV.

Letter of Support

M:\My Documents\P - PUP\PUP 2

Please upload a brief letter from your Research Mentor, stating that s/he supports the proposal request and if an award is made, that s/he will support the applicant to maximize the probability of a successful project.

Please review application before clicking Submit. However, be aware that if you click Previous you will need to upload all your ATTACHMENTS again. Once you Submit you can not go back. Please do not click on Submit more than once.