of Illinois

2025 Research Grant Application for the Young Investigator

NKFI Research Grant Program:
The Research Grant program funds investigators who have research projects that will increase the understanding of kidney and transplantation-related diseases and improve the clinical management and treatment or cure of these diseases.

Maximum Funding: $60,000.00 each year for up to two years, up to $120,000.00 total during the two-year period.
- Application Deadline: **April 30, 2025**
- Notification of Award: **June 13, 2025**
- Funding Begins: **July 1, 2025**

Applicant and Topic Guidelines:
- Research must be conducted at a facility or institution within the state of Illinois
- Grants support young investigators who are within 5 years of the conclusion of their last post-doctoral position or terminal degree program
- Topics must be in the areas of nephrology, urology, or transplantation with an aim to improve the understanding, diagnosis, and/or treatment of kidney-related diseases
- Funds **cannot** be used for salary support or indirect costs for the PI or co-PIs
- Applicants must have no other source of funding for their research program (excluding awards that predominantly support salary or indirect costs for the PI or co-PIs such as career development awards)
- Applicant cannot be a PI or co-PI of R-level research study or equivalent (e.g., VA Merit grant)

Evaluation of existing funding will be at the discretion of the NKFI Research Committee. Decisions of the Research Committee will be final.

The Review Process:
As of 2015, the NKFI Professional Advisory Board (PAB) made the decision to move to the National Institutes of Health grant scoring system. In summary, the NIH grant application scoring system uses a 9-point scale for both overall impact scores and scores for individual review criteria. For both types of score, ratings are in whole numbers only (no decimal ratings). NIH expects that scores of 1 or 9 be used less frequently than the other scores. For the overall impact score, the scale is used by all eligible (without conflict of interest) SRG (Scientific Review Group) members/PAB Research Review Committee members. Five (5) is considered an average score.

For criterion scores, the scale is used by the assigned reviewers to evaluate five individual criteria (Significance, Investigator(s), Innovation, Approach, and Environment). Reviewers will consider the strengths and weaknesses within each criterion. For example, a major strength may outweigh many minor and correctable weaknesses.

Please see Grant Scoring System and Procedure Guidelines for further details.

Guidelines for Submission of Applications:

All applications must be made on the NKFI forms available on the NKFI's website: www.nkfi.org. All funding requests must be submitted in U.S. currency. NKFI requires that you submit the application electronically as an attachment sent to research@nkfi.org. Applications received after the deadline will not be considered. Each application will be acknowledged by email in return.

Resubmission Applications

A resubmission is an unfunded application that was previously submitted for the Young Investigator Research Grant but has been modified following initial review and resubmitted for consideration.
- We allow only one resubmission for each new application that was reviewed and not funded.
- You must resubmit within 14 months of the application it follows. Thereafter, the application must be submitted as a new application.
- After an unsuccessful resubmission, you may submit the idea as a new application.
- Alternatively, you may submit an unfunded new application as new again, without a resubmission.

Additional Application Requirements for Resubmission Applications
- You may need to make significant changes to the resubmission, compared to the new application that it follows.
- You must include an introduction for all resubmissions that:
  - summarizes substantial additions, deletions, and changes to the application
  - responds to the issues and criticism raised in the summary statement
  - is one page or less in length
- In addition to updating all aspects of the resubmission application including adhering to any changes in the NKFI submission application, applicants must arrange for resubmission of the reference letters required for this grant.

Award Notifications:

Applicants will be notified by email regarding the status of their applications. **PLEASE DO NOT CALL TO REQUEST COMMENTS OR TO ASCERTAIN WHETHER OR NOT THE GRANT HAS BEEN   FUNDED.** Notification for Research Grants will be sent by June 13, 2025. It is the responsibility of the Applicant to notify his/her institution of any NKFI Award.

General Policies

I.   **Progress, Final and Financial Reports**

1.   Award funds are paid to the recipient's institution in bi-annual payments by mail. Each year of funding, after the first, is contingent upon receipt of a research progress report and a financial accounting of expenditures through the first 9 months of the grant. This report is due in the NKFI office within 30 days before the end of the first budget year.

2.   A non-technical final report, written for a lay audience, must be filed with the NKFI no later than 60 days after the end of the entire funded period. A report from the investigator's fiscal office showing the final disposition of funds must be submitted at the same time. The format for these reports is devised by the investigator and the institution. *All unexpended funds must be returned to the NKFI.* Additional funds beyond the original award may **not** be requested for any reason. Please note that this report may be published in the NKFI public materials.

II.   **Funding from Other Sources**

If support for the proposed project is obtained from other sources, the recipient must notify the NKFI immediately. Any funds awarded by the NKFI that remain unused will be withdrawn should funding be received for the same project from other sources.

III.   **Change of Institution/Transfers**

Research Grant recipients may not transfer awards, in whole or part, between institutions without prior **written approval** by the NKFI. Research Grant may not be transferred to another recipient/PI.

IV.   **Extensions/Absences**

1.   No-cost extensions must be requested in writing but are at the NKFI's discretion.

2.   Unexpended first-year funds may be carried over to the final year of funding by written request.

V. **Publications**

Acknowledgement of support from the National Kidney Foundation of Illinois must be made when findings are reported, published or publicity is given to the work. Acknowledgement such as **"Supported by a grant from the National Kidney Foundation of Illinois"** is suggested. Two hard copies of any such publication should be sent to the NKFI Office. One PDF also should be e-mailed to research@nkfi.org.

VI. **Patents**

Awards are made with the understanding that the NKFI will receive written notification of the filing of any letters patent for any discovery made based on work funded by the NKFI.

VII. **Ownership of Equipment**

Equipment purchased under an NKFI award is for the use of the Principal Investigator and associates, and generally follows where the PI works during the course of the funded grant. Equipment requests must be justified in the application.

VIII. **Biological Substances**

The NKFI expects the sharing of biological substances, reagents, or other materials resulting from NKFI supported research. This will encourage optimal utilization of new technology by the research community.

IX. **Cancellation/Termination**

When a funding recipient has failed to comply with terms and conditions of an award, the NKFI, at its sole discretion, may cancel/terminate the award. In the event that the NKFI determines that funds are not being used as approved, the NKFI may immediately terminate any further installments. In the event of cancellation/termination by the NKFI or the recipient, unexpended funds **must** be returned to the NKFI.

Application Form Instructions

Please review the entire application form before completing.

A continuation page can be found at the end of the application. All applicants should reproduce as many continuation pages as necessary (copy/paste in place). Page numbering will be handled automatically by the software.

Please enter your full name within the header, so it appears on every page of the application.
Note: Enter your name as given name first, family name last (e.g. John Brown).

All pages of this grant application are to be completed by all applicants. The Principal Investigator must sign the Assurance Statement at the bottom of page 19 for the application to be reviewed. Failure to complete any part of the application will result in refusal of review.

Paper Size and Margins
- Use paper size no larger than *standard letter paper size (8 ½" x 11")*.
- Provide at least one-half inch margins (top, bottom, left, and right) for all pages. No applicant-supplied information can appear in the margins.

Font (size, color, type density) and Line Spacing
Adherence to font size, type density, line spacing and text color requirements is necessary to ensure readability and fairness. Although font requirements apply to all attachments, they are most important and most heavily scrutinized in attachments with page limits.

Text in your attachments must follow these minimum requirements:
- **Font size**: Must be 11 points or larger. Smaller text in figures, graphs, diagrams and charts is acceptable, as long as it is legible when the page is viewed at 100%.
- Some PDF conversion software reduces font size. It is important to confirm that the final PDF document complies with the font requirements.
- **Type density**: Must be no more than 15 characters per linear inch (including characters and spaces).
- **Line spacing**: Must be no more than six lines per vertical inch.
- **Text color**: No restriction. Though not required, black or other high-contrast text colors are recommended since they print well and are legible to the largest audience.

Legibility is of paramount importance. Applications that include PDF attachments that do not conform to the minimum requirements listed above may be withdrawn from consideration.

Applicants must combine all requisite components of the application into one (1) PDF document, ordered and named in accordance with application instructions.

<u>About the Application Form automation:</u>

The application form has been designed to make filling out as convenient as possible. Please do not modify the underlying form structure. It is best to copy the application form and begin work on the copy.

NKFI cannot provide technical support for the Application Form. If you encounter problems, please contact your local technical support resources.

Grant Application Checklist

** ** All forms must be completed according to <u>**NIH standards and guidelines**</u>.**

1. Investigator Info.. ☐

    a. Biographical Sketch (max. 5 pages) .... ☐

2. Project/Performance Site .... ☐

3. Research & Related Other Project Info.. ☐

    a. Human Subjects & Vertebrate Animals.. ☐

    b. Project Abstract (max. 30 lines of text)... ☐

    c. Facilities and Resources... ☐

    d. Equipment .... ☐

4. Budget.. ☐

    a. Personnel Justification .... ☐

    b. Consortium Justification... ☐

    c. Additional Narrative Justification .... ☐

5. Specific Research Plan (max. 9 pages).. ☐

    a. Specific Aims (1 page)... ☐

    b. Significance (1 page) .... ☐

    c. Innovation (1 page).. ☐

    d. Approach (6 pages).. ☐

6. Assurances .... ☐

7. Letter from Department Chair/Section Chief AND up to 3 Letters of Support...................... ☐

DO NOT WRITE BENEATH THIS LINE

**NATIONAL KIDNEY
FOUNDATION®**
of Illinois

215 West Illinois Street, Suite 1C
Chicago, Illinois 60654
312-321-1500 ph. 312-321-1505 fax

Date Submitted: _____

Applicant: _____   Degree(s): _____
    (Please do not list any Co-Investigators)

Institution Name: _____

Department: _____
Division: _____

Institution Address: _____

_____

_____

Telephone: _____   Fax: _____

Email Address: _____

Title of Proposal: _____

_____

Proposed Project Start & End Date: Start: _____End: _____

Responsible financial officer to whom funds should be sent, and who will keep a full account of disbursements:

Name: _____   Title: _
(please print)

Institution Name: _____

Address: _____   Telephone _
                            Fax: _
_____

Signature: _____   Email Address: _

CERTIFICATION: We, the undersigned, certify that the information submitted is accurate and complete to the best of our knowledge and accept the terms and conditions of NKFI if this application is funded.

SIGNATURES: Applicant: _____

                    Responsible Administrative Official: _____

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Biographical Sketch: Please follow the outline below. Use [Continuation Pages](#) as needed.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE *(if applicable)*	Completion Date MM/YYYY	FIELD OF STUDY

A. **Personal Statement**

B. **Positions and Honors**

C. **Contributions to Science**

D. **Additional Information: Research Support and/or Scholastic Performance**

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PROJECT/PERFORMANCE SITE(S)

Project/Performance Site Primary Location			
Institution:			
DUNS:			
Street 1:	Street 2:		
City:	County:		State:
Province:	Country:		Zip/Postal Code:
Project/Performance Site Congressional Districts:			
Additional Project/Performance Site Location			
Institution:			
DUNS:			
Street 1:	Street 2:		
City:	County:		State:
Province:	Country:		Zip/Postal Code:
Project/Performance Site Congressional Districts:			

HUMAN SUBJECTS & VERTEBRATE ANIMALS

Are Human Subjects Involved?   YES ☐ NO ☐

    a. Are copies of the institutional review board approval attached to the application?*   YES ☐ NO ☐

        b. If **NO**, give date of anticipated approval at which time copies will be forwarded. _____

Are Vertebrate Animals used?   YES ☐ NO ☐

    a. Are copies of the institution's animal care and use committee approval attached to the   YES ☐ NO ☐
application?**

        b. If **NO**, give date of anticipated approval at which time copies will be forwarded. _____

Appropriate institutional review board and/or animal care and use committee approval forms must be submitted before release of funds in case of approval.

*Please note: If funded, payments will NOT be sent without appropriate forms.

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PROJECT ABSTRACT
Must be *no longer than 30 lines of text.*

FACILITIES & RESOURCES

Please include a brief, succinct description of the facilities and resources. Do not exceed *1 page*.

EQUIPMENT

Please include a brief, succinct description of the equipment being used. Do not exceed *1 page*.

MODULAR BUDGET

Budget Period: 1			
Start Date:		End Date:	
			Funds Requested ($)
A. Direct Costs		Direct Cost less Consortium F&A	
		Consortium F&A	
		Total Direct Costs	
B. Indirect Costs			

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base ($)	Funds Requested ($)
1.				
2.				
3.				
4.				

Cognizant Agency (Agency Name, POC Name and Phone Number)			
Indirect Cost Rate Agreement Date		Total Indirect Costs	
C. Total Direct and Indirect Costs (A + B)		Funds Requested ($)	

Budget Period: 2			
Start Date:		End Date:	
			Funds Requested ($)
A. Direct Costs		Direct Cost less Consortium F&A	
		Consortium F&A	
		Total Direct Costs	
B. Indirect Costs			

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base ($)	Funds Requested ($)
1.				
2.				
3.				
4.				

Cognizant Agency (Agency Name, POC Name and Phone Number)			
Indirect Cost Rate Agreement Date		Total Indirect Costs	
C. Total Direct and Indirect Costs (A + B)		Funds Requested ($)	

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Cumulative Budget Information	
1. Total Costs, Entire Project Period	
Section A, Total Direct Cost less Consortium F&A for Entire Project Period	$
Section A, Total Consortium F&A for Entire Project Period	$
Section A, Total Direct Costs for Entire Project Period	$
Section B, Total Indirect Costs for Entire Project Period	$
Section C, Total Direct and Indirect Costs (A+B) for Entire Project Period	$

Justifications:

Please include personnel, consortium, or additional narrative justifications as needed.

SPECIFIC RESEARCH PLAN

This section should be completed by the Principal Investigator (Applicant). <u>The research plan must **NOT** exceed 9 pages in length, in addition to this cover page.</u> The narrative sections should follow the font and margin guidelines. Please note that the NKFI requires the <u>9 pages include all figures and tables.</u> References are not included in the 9-page limit. **AN APPLICATION WITH PAGES IN EXCESS OF 9 WILL NOT BE ACCEPTED FOR REVIEW**. Complete information should be included to permit review of each application without reference to previous applications. *(Please use this page as your signed cover page to the research plan. Use the next page to begin your research plan).*

The research plan should address these four areas:
1. Specific Aims
2. Significance
3. Innovation
4. Approach

Please include:
- References

Date	Principal Investigator (Applicant) Signature

NKFI Young Investigator Assurance Form:

Project Title:

*Please Note: When multiple Principal Investigators are proposed in a NKFI Young Investigator application, this assurance must be signed by all named Principal Investigators.

Principal Investigator Assurance Statement:
I hereby certify: (1) that the information submitted within the application, and during the award period, is true, complete, and accurate to the best of my knowledge; (2) that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties; and (3) that I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of this application.

Principal Investigator Signature:
Print or Type Principal Investigator Name:
Date:

*List Additional Principal Investigators Below:

Principal Investigator Signature:
Print or Type Principal Investigator Name:
Date:

Principal Investigator Signature:
Print or Type Principal Investigator Name:
Date:

Principal Investigator Signature:
Print or Type Principal Investigator Name:
Date:

Principal Investigator Signature:
Print or Type Principal Investigator Name:
Date:

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LETTERS OF SUPPORT

1. Letter from Department Chair or Section Chief
    a. The letter must provide assurance that the candidate:
        i. Holds a full-time faculty appointment OR a full-time staff research position.
        ii. Will devote at least 75% of his or her time to research.
        iii. Will use the award for independent investigation.
        iv. Will have appropriate laboratory or research space and access to necessary equipment.
    b. The letter should be signed on institutional letterhead.
    c. Letter documenting permission to submit application
    d. The letter or document must provide proof that the applicant's institution is aware of the program guidelines and has approved submission of the application.
2. Letter from mentor/mentors on specific proposed research project.
3. UP TO three (3) support letters.
    a. Support letters should be written by persons familiar with the candidate's scientific interests and abilities.

Letters are submitted blindly through email.
Please direct your Department Chair or Section Chief and references to submit letters to:

Email
Research@nkfi.org
Subject Line: "Letter of Support for [Primary Investigator's First and Last Name]"

Continuation Page