

**RFA # 17833
Grants Gateway # DOH01-FLLOW4-2019**

**Individual Predoctoral and Postdoctoral Fellowships
in Spinal Cord Injury Research (Round 4)**

QUESTIONS and ANSWERS

**June 13, 2018 – July 2, 2018
Including an applicant conference on June 27, 2018**

Please note that the slides from the Applicant Conference are attached to the end of this Question and Answer document for reference.

Letter of Intent (RFA Section IV.C. and Attachment 1)

1. When is the Letter of Intent due?
 - A. The Letter of Intent form (Attachment 1) was due on 6/27/18, however, Letters of Intent will still be accepted after the deadline. The Letter of Intent is not mandatory but is strongly encouraged. See Section IV.C. of the RFA for submission instructions.
2. Do we need to include any information (e.g., summary of aims) in addition to the Letter of Intent form?
 - A. Submit only the information requested on the form. No additional information will be considered. We rely on title, key words, lay summary paragraph and names to help identify potential peer reviewers.
3. Who should we list on the Letter of Intent form?
 - A. Identify all participants involved in the proposed project, both internal and external to your organization. It is understood that these names may change; they are used only as a preliminary screening for conflict of interest among potential peer reviewers. Sections may be added, if necessary, to list all participants.
4. The box of the Letter of Intent form permits the text to exceed the size of the box. Should we limit the amount of text to that which is visible or can we use the scroll bars to add additional text?
 - A. You can use the scroll bars to add text as much as allowed in the form. The paragraph does not need to be limited to the visible part of the box.
5. To what extent does the Letter of Intent commit the title and research proposed in the application?

- A. There is no commitment inferred by the submission of a Letter of Intent.
- 6. How specific does the Letter of Intent have to be?
 - A. It is important to submit a detailed LOI and supply sufficient information so the peer review contractor, AIBS, can recruit experts suitable for your application.

Eligibility (RFA Section II)

- 7. Can the research be done in other states or only in New York State?
 - A. Applicants must be New York State institutions. However, those institutions are permitted to subcontract with collaborators world-wide. Please note that all research done outside of NYS must be performed in accordance with New York State laws, regulations and applicable contract provisions.
- 8. Can a Sponsor/PI be on a predoctoral and postdoctoral application?
 - A. Yes, a Sponsor/PI may be named on one predoctoral application and one postdoctoral application, as long as they are separate projects with no overlap in scope. However, if a Sponsor/PI submits an application for more than one predoctoral and/or postdoctoral students those applications will be disqualified.
- 9. Will an application be disqualified if the Sponsor/PI is currently in contract with any of the previous RFAs released for “Individual Predoctoral and Postdoctoral Fellowships in Spinal Cord Injury Research” Rounds 1, 2 and/or 3?
 - A. Sponsor/PI’s that are currently Sponsor/PI’s from the previous RFAs for “Individual Predoctoral and Postdoctoral Fellowships in Spinal Cord Injury Research” Rounds 1, 2, and/or 3 can apply for this RFA.
- 10. Can I be a Sponsor/PI on one application and a mentor on a different application(s)?
 - A. Yes.
- 11. At our institution, graduate students’ full time professional effort is defined as 50% because they are students the other 50% of the time. Can graduate students with a 50% full time professional effort be funded through this RFA?
 - A. Yes, but you must include official documentation of that policy in the application appendices.
- 12. I am confused regarding the usage of the term 'mentor'. I completed a fellowship (3 years) in a different State (California), but I would not put my PI in the category as a mentor. The interchange use of those terms, PI and mentor, is somewhat confusing and I am hoping you can clarify? Can a mentor not be categorized as a PI and vice versa? Am I eligible to apply?

- A. The Sponsor/PI is the point of contact for all aspects of the contract and will supervise and provide mentorship to the fellow. Additional mentors may be chosen to enhance the training experience and may assist with the program development of the study. Since you have completed a 3-year fellowship you are not eligible to apply. No exceptions can be made to the specifications stated in the RFA. This funding is intended for candidates with no more than three years fellowship experience under any mentor(s) by the expected date of the award (August 1, 2019).
13. Are applications allowed with a shorter (less than 3 year) duration, for example, if a trainee applies for one or two years of training to learn a new method to be applied within the context of spinal cord injury research?
- A. Yes, however a shorter training period could adversely impact the score of the application. You should evaluate your proposed application in the context of the “Fellow and Development Plan” review criterion.
14. I have preliminary data from our laboratory involving a different animal model than will be proposed in my workplan. Can I use this preliminary data in my application?
- A. Preliminary data is not a requirement for these applications. If you believe the preliminary data will support your application you may use it.
15. My proposed research will study gut motility dysfunction in spinal cord injury to improve SCI patients’ lives. Is this research responsive to the RFA?
- A. From the RFA; “The SCIRB’s mission is to stimulate high-quality, innovative SCI research that will help promote treatment and cure for SCI, including methods for reversing paralysis or restoring function caused by injury, or for minimizing or preventing damage occurring during acute phases of injury.” Since your goal is to restore function caused by injury it is responsive to the RFA.

Fellows, Sponsors/PIs and Mentors

16. Is joint Co-PI leadership from the same institution allowed?
- A. Multiple PIs are not recognized. One individual from the applicant institution must be designated as the PI. If one or more Co-PIs are also designated, those individuals may or may not be from the applicant institution. See instructions (RFA Attachment 2) for Forms 1 and 1-S.
17. I have more than one Co-PI from my institution. How do I list all Co-PI’s on the application?
- A. Form 1 allows only one Co-PI to be listed. Use Form 2 and the work plan narrative to designate the others.

18. Is there a required percentage of effort for the PI and/or Co-PI?

A. No. See RFA Attachment 2 instructions for completion of the Online Budget and Justification.

19. Do we need to specify who the fellow will be?

A. Yes. Without knowing who the proposed fellow is, the Sponsor/PI and Applicant Fellow cannot prepare the fellow's individualized Training/Career Development Plan as required by the RFA in Attachment 2, Application Checklist and Instructions.

20. Do we need to submit the predoctoral fellows' GRE scores, transcripts, etc.?

A. These documents are not required but are not prohibited. They may be included in various sections, as appropriate. Among those sections might be biographical sketch, appendices, and Training/Career Development Plan.

21. Our doctoral students have a Ph.D. committee that meets regularly with the student. Should I provide supporting documentation of the committee because they are monitoring the progress of the student? Should I provide biographical sketches of the committee members?

A. Yes. These individuals would be considered Mentors who play a specific role in the fellow's development.

Submitting the Application

22. What is to be submitted by the application due date?

A. Refer to RFA Section IV.E. How to Complete and File an Application. Applications may only be submitted through the NYS Grants Gateway; no paper, facsimile or any other type of electronic submissions will be accepted. No other documents will be accepted after the due date. All sections of the online application must be completed prior to submission.

23. What is the application due date and time?

A. The application must be successfully uploaded, found to be error-free and accepted through the New York State Grants Gateway by 4:00 PM EST on July 30, 2018. Please note the Grants Gateway system time will be used, not the time displayed by your local computer.

24. How do I get help using the Grants Gateway?

A. As outlined in RFA Section IV. B., applicants are strongly encouraged to access the guides, videos and training opportunities available via the Grants Team website at: <https://grantsreform.ny.gov/grantees>. Technical questions regarding the forms used in the

application should be directed to the DOH contact listed on the cover of the RFA up until the application deadline. Grants Gateway questions regarding application completion/submission, registration and policy should be directed to the Grants Team, Monday-Friday from 8am to 4:30 pm at 1-518-474-5595 or grantsgateway@its.ny.gov. Technical issues regarding the NYS Grants Gateway should be directed to the Agate Technical Support Help Desk, Monday-Friday from 8am – 8pm at 1-800-820-1890 or helpdesk@agatesoftware.com. Further, the NYS Grants Team provides ongoing training webinars; the webinar schedule can be found here: <http://grantsreform.ny.gov/training-calendar>

25. Who can submit an application in the NYS Grants Gateway?

- A. See RFA Section IV.E. for information about “roles.” Roles are assigned by the Grants Gateway Delegated Administrator within your organization. Applicants are strongly encouraged to consult the training documentation provided on the NYS Grants Gateway and Grants Team websites.

26. Is it acceptable for a fellow to use his/her PI’s NYS Grants Gateway account?

- A. If your PI gives you access to their account, it is acceptable.

27. The upload time for forms and documents can be lengthy. How could this impact a timely submission of my application?

- A. Applicants are strongly encouraged to start completing an application in the NYS Grants Gateway no less than seven days before the due date. Applicants are strongly encouraged to submit proposals at least 48 hours prior to the due date and time. This will allow sufficient opportunity for the applicant to obtain assistance and take corrective action where needed. Both DOH and Grants Team staff are available to answer applicants’ technical questions and provide technical assistance prior to the application deadline. However, please note that although DOH and the Grants Team staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding.

28. If there are multiple errors uploading completed application forms to the NYS Grants Gateway, will the applicant be notified of all errors at once, or only one at a time?

- A. A single list of global errors will be produced. It is highly recommended to use the “Check Global Errors” button repeatedly until no errors are found.

29. Is there a checklist that a PI can use to see whether they have completed everything for application submission?

- A. To ensure that all mandatory pass/fail items and penalty items are adequately addressed, see RFA Attachment 2 page 1. The Grants Gateway requires other forms to be

completed and submitted as well. See the instructions provided in Pre-Submission Uploads and Program Specific Questions. If required questions are not answered and/or files not uploaded, you will receive an error message describing what is missing. NOTE: the Grants Gateway does not assess the content of text boxes or uploads, only that questions are answered and files are uploaded successfully.

30. Can we view the concatenated pdf file of our application before submitting the application?

- A. Unfortunately, the concatenated file is created after application submission. It can be viewed under “Application Versions” of the Forms Menu. Applicants will need to ensure all the uploaded pdf documents in their application are legible as they will be used for peer review. The concatenated pdf file of the application will not be used for peer review.

Application Forms

31. Why is spell check turned off on some of the application forms and why can't we cut and paste into them?

- A. Forms 1-5 are set up as protected fillable forms so the data can be exported to databases used to facilitate peer review and award processes. Spell checking is disabled in Forms 1-5 only; it is available in other form sets. The cut/paste function will work on Forms 1-5; be sure to insert text inside the gray boxes. Please submit Forms 1-5 as a fillable pdf.

32. We download all the forms from the Pre-submission Uploads section of the Grants Gateway. Where do we upload them?

- A. Most completed application forms will be uploaded in response to Program Specific Questions. Please see the instructions located in the Pre-submission Uploads section of your Grants Gateway application. RFA Attachments 1, 9 and 10 are uploaded in the Pre-submission Uploads section. Please do not upload other forms in the Pre-submission uploads section as this will cause duplicate uploads. Duplicate uploads may result in different versions of the file being uploaded in those two locations. Only the files uploaded in the correct section of the Grants Gateway will be used for peer review. Uploading files in the wrong section in the Grants Gateway might adversely impact the score of the application.

33. Where should I include letters of collaboration (not co-PI) and collaborators' biographical sketches?

- A. Letters of collaboration may be included in the appendices (in the same file as Forms 7-12). Biographical sketches of collaborators named in the workplan and budget should be incorporated to the other biographical sketches using Attachment 8/Form 13. The biographical sketches of other collaborators may be included in the appendices. See RFA Attachment 2 for further details.

34. Why are there two workplans in the application?

- A. The Workplan Narrative – Form 10, will be used by the peer reviewers to understand the full context and details of the proposed research plan. See RFA Attachment 2 for instructions. The On-line Workplan will be included in a system-generated contract using a standardized format. Both are peer reviewed, so completeness and consistency between the two is important.

35. What are the format specifications of the workplan (font, margins, etc.)?

- A. The forms are pre-set with acceptable fonts, margins, etc. Please refer to RFA Attachment 2 for additional details, page limitations and penalties.

36. For the appendices, is there a page limit and what can I submit here?

- A. There is no page limit for the appendices. See page 1 of Attachment 2 for appropriate materials that can be placed in the appendices. The appendices may not be used to exceed the page limits for the Workplan Narrative and/or the Training/Career Development Plan.

37. Are there instructions about how to complete the online portions of the application, workplan and budget?

- A. Yes. See the Grantee User Guide, videos and training materials on the Grants Team website at: www.grantsreform.ny.gov and RFA Attachment 2.

Budget

38. Can we budget for less money than the available funds for each mechanism?

- A. Yes, you should only request funds appropriate for the cost-effective performance of the proposed program.

39. Can I list someone by title on the budget instead of by name?

- A. Detailed budget justifications are required for each budget line. All PIs and Co-PIs should be identified by name. If other positions are yet to be filled, you should specify the title of the position and “to be determined” for the name of the individual for the budget justification.

40. Is overhead allowed? Is it the same as the National Institutes of Health (NIH)?

- A. Overhead is allowed but it is not the same as the NIH. Facilities and Administrative Costs are limited to 20% of modified direct costs up to and are included in the Institutional Allowance. See RFA Attachment 2 and Question 44 for details.

41. Does the applicant need to budget/spend the maximum of money for all years?
- A. No. Each annual budget should reflect the true needs of the project (see RFA Attachment 2 and RFA Section V.F., Review Criteria). All aims of the project are expected to be completed prior to the end of the contract. Requests for carry forward of unspent funds and no cost extensions may not be granted.
42. Do we have to submit a budget for the first year or all years? Do we need to have budgets for sub-applicants?
- A. Detailed line item budgets and justifications for applicants and sub-applicants must be submitted for the entire length of the award. The applicant's Year 1 budget is entered directly into the Grants Gateway while subsequent years are entered to an Excel file that also must be printed to a PDF file. The sub-applicant's budgets for the entire length of the contract are entered into an Excel file that also must be printed to a PDF file. Detailed instructions are provided in RFA Attachment 2.
43. How much budget justification is necessary?
- A. Fully justify each budget line for each year. Provide sufficient detail to demonstrate that specific uses and amounts of funding have been carefully considered. Also, see RFA Section V.F. for review criteria for budget and other aspects of the application.
44. Is there guidance for completing the budget?
- A. If you follow the instructions and you still need help, you can seek guidance within your Institution and/or contact the Grants Team help desk (see question no. 23) for information regarding the online year 1 budget. You also can contact scirb@health.ny.gov for technical assistance. If you need assistance, it is recommended you contact the Grants Team or Department of Health as early as possible to ensure there is sufficient time to address your question.
45. Section III, page 5 of the RFA, states "This award is not designed to fund the proposed research". Does it mean that the specific aims in the said application could be overlapped with grants the lab has been awarded?
- A. You are correct that grant funds from other sources, including existing SCIRB awards, need to be used to fund the proposed research. The source of the funds to be used must be described in the Letter of Support from the PI/Sponsor and Institution.
46. The stated limit on "Institutional Allowance" for non-personal services is \$9,850 for postdoctoral fellows. This is significantly below the typical ~30% fringe rate that is added onto stipends/salaries. Does this mean that we would be responsible for supplementing the typical fringe benefit amount? The RFA states that Institutional Allowance includes F&A, and that "From this total," other expenses such as travel, supplies, human subjects, etc. all come from the same Institutional Allowance amount of \$9,850? Is that correct? We would

normally expect to budget separately for those types of costs (up to the total direct cost limit of \$74,086), and then calculate additional F&A based on modified direct costs. Can you please help us clarify this?

- A. Postdoctoral fellowships will be a three-year award with total annual direct costs of **up to** \$74,086 per year. Postdoctoral fellows with little experience will have smaller stipends thus reducing the maximum annual budget to less than \$74,086 per year. The stated Institutional Allowance of \$9,850 for postdoctoral fellows is correct. Unfortunately, you cannot budget separately for these costs up to \$74,086 per year. The institution is responsible for supplementing expenses such as fringe.

Minority and Woman-Owned Business Enterprise Requirements

47. Are Minority and Woman-Owned Business Enterprise Requirement forms required to be submitted with the application? Do they have to be submitted if we will not exceed the \$25,000 threshold?

- A. Yes. A completed Form 1 and/or Form 2 must be included in the application submission. See RFA Section IV.I. and Attachment 10.

48. We cannot identify MWBE's on the <https://ny.newnycontracts.com> website that can provide the supplies and equipment we need for our research. Are there any other resources available for identifying MWBE's that we can use?

- A. No. The <https://ny.newnycontracts.com> website that identifies approved MWBE's is always being updated as new vendors are approved so you can periodically check back for new vendors. As part of completing the forms, you must document your efforts to identify MWBE's. **NOTE:** Failure to do due diligence, fill out the forms completely and correctly and attach sufficient documentation in the Pre-submission Uploads section of the application will delay processing for all awarded contracts. If you cannot meet the goal, you must apply for an exemption.

Application Review and Award Process

49. How are the peer reviewers selected?

- A. The Department of Health's peer review contractor, American Institute of Biological Sciences (AIBS), will review the LOI summary paragraph and workplan narratives to recruit experts appropriate to the area of proposed research.



**Department
of Health**

**Wadsworth
Center**

**Individual Predoctoral and Postdoctoral
Fellowships in Spinal Cord Injury Research
(Round 4) RFA
Applicant Conference**



July 5, 2018

Presenter: Charles Burns

Today's Agenda

1. Administrative Items

- Important deadlines and requirements

2. Overview

- RFA currently posted in the NYS Grants Gateway

3. RFA Attachments

- Attachments 1-11
- Expenditure Budget
- Online Work Plan

4. Review and Award Process

5. Your Question

6. Grants Gateway Overview

7. Your Questions



Administrative Items



Department
of Health

Wadsworth
Center

See RFA cover sheet

Important Dates

Letter of intent and due: 6/27/2018

Substantive questions due: 7/2/2018

Questions, answers
and updates posted: 7/6/2018

Applications due: 7/30/2018
by 4PM EST

EMAIL

scirb@health.ny.gov

<https://grantsgateway.ny.gov>



**Department
of Health**

Wadsworth
Center

Administrative Requirements

- Not-for-profits must be Registered and Prequalified in the NYS Grants Gateway (*RFA Section IV. M.*)
- Properly prepare and submit all required Forms (*RFA and RFA Attachment 2*)
- Freedom of Information Law (*RFA Section V. B.*)



★ The following table provides a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway

Role	Create and Maintain user Roles	Initiate Application	Complete Application	Submit Application	Only view the Application
Delegated Admin	✓				
Grantee		✓	✓		
Grantee Contract Signatory		✓	✓	✓	
Grantee Payment Signatory		✓	✓		
Grantee System Administrator		✓	✓	✓	
Grantee View Only					✓

Quick Contacts & Links

See RFA cover sheet & pg. 7

Extramural Grants Administration

New York State Department of Health

Wadsworth Center

Empire State Plaza, Room C345

PO Box 509,

Albany, New York 12201-0509

Phone: 518-474-7002

scirb@health.ny.gov

Agate Technical Support Help Desk

Phone: 1-800-820-1890

Hours: Monday thru Friday 8am-8pm

helpdesk@agatesoftware.com

(Technical Questions)

Grants Gateway Team

Phone: 518-474-5595

Hours: Monday thru Friday 8am-4:30pm

grantsgateway@its.ny.gov

**(Application Completion, Policy, and
Registration Questions)**

<https://grantsreform.ny.gov/Grantees>

<http://grantsreform.ny.gov/youtube>

<http://grantsreform.ny.gov/training-calendar>

Grantee Quick Start Guide

https://grantsreform.ny.gov/sites/default/files/grantee_quick_start_guide.pdf



**Department
of Health**

Wadsworth
Center

RFA Overview



Department
of Health

Wadsworth
Center

Purpose of the RFA

This Request for Applications (RFA) provides funding for individual predoctoral and postdoctoral fellowships that will enable New York State to attract and retain the most promising and exceptionally-talented predoctoral and postdoctoral fellows. The intent of this initiative is to support the continued training of researchers with extraordinary potential for making significant contributions to the fields of SCI research.



Department
of Health

Wadsworth
Center

Available Funds

Approximately
\$1.5 million is available to
support approximately
six (6) awards.



Anticipated Contract

Three (3) year contracts

- Anticipated Contract start date: 8/1/2019
- Annual direct costs are capped at \$45,200 for Predoctoral Students and \$74,086 for Postdoctoral Fellows
- Institutional Allowance is available which may include health insurance, F&A, and/or research related expenses



See RFA pg. 5

Eligible Fellows

- Predoctoral fellows have a baccalaureate degree and are currently enrolled in a PhD or equivalent research degree program
- Postdoctoral fellows will have no more than two years of prior postdoctoral training under the current sponsor's supervision by the and no more that three years total fellowship experience by the expected start date of the award.



**Department
of Health**

Wadsworth
Center

See RFA pg. 4

Who May Apply?

- Applicant must be a New York State not-for-profit organization or governmental organization.
- The eligible Principal Investigator (PI)/sponsor, designated by the applicant organization, has the skills, knowledge, and resources necessary to carry out the proposed Workplan, and is not a postdoctoral fellow or other dependent research staff.
- A PI/sponsor may only submit one (1) application per funding mechanism in response to this RFA, regardless of the organization under which (s)he submits the applications.



**Department
of Health**

Wadsworth
Center

RFA Attachments 1-11



Department
of Health

Wadsworth
Center

See RFA pg. 8

Attachment 1: Letter Of Intent (LOI)

Provide the following using the LOI Form:

- Descriptive title of the proposed project
- Summary paragraph of the intended project
- List all participants involved in the proposed project

*Download & Upload
in the Pre-
Submission
Uploads Section of
the Grants Gateway*

*Email to
scirb@health.ny.gov*



**Department
of Health**

Wadsworth
Center

Attachment 2: Application Checklist and Instructions

- Mandatory Pass/Fail Items
- Appendices
- Application Penalties
- Prescribed Format

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*



**Department
of Health**

Wadsworth
Center

Attachment 3: Application Forms 1-5

1. Applicant Face Page
2. Staff, Collaborators, Consultants and Contributors
3. Acronyms and Abbreviations Used in Application
4. Lay Abstract
5. Scientific Abstract

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway*



**Department
of Health**

Wadsworth
Center

Attachment 3: Application Forms 1-5 (continued)

Form 1 - Applicant Face Page

Project Title: Award Mechanism (e.g. ODA Award, etc):

PI Email: Co-PI Email:

Project Start Date: Year One Total Cost:

Project End Date: Grand Total Cost:

New York State Applicant Organization (NYO):

NYO Name: Contracts or Grants Official (GO):

GO Last Name:

GO First Name:

GO Title:

NYO Mailing Address:

NYO Street1: GO Street1:

NYO Street2: GO Street2:

NYO City: GO City:

NYO State: NY NYO Zip: GO State: NY GO Zip:

NYO Phone: GO Phone:

NYO Fax: GO Fax:

NYO Email: GO Email:

Principal Investigator/Program Director/Sponsor:

PI Last Name: PI First Name: Co-PI Last Name: Co-PI First Name:

PI Middle Initial: PI Degree: Co-PI Middle Initial: Co-PI Degree:

PI Organization: Co-PI Organization:

PI Department: Co-PI Department:

PI Mailing Address (Street, MS., P.O. Box, City, State, Zip):

PI Street1: Co-PI Street1:

PI Street2: Co-PI Street2:

PI City: Co-PI City:

PI State: NY PI Zip: Co-PI State: NY Co-PI Zip:

PI Phone: Co-PI Phone:

PI Fax: Co-PI Fax:

Form 1 - Applicant Face Page

Project Title: Award Mechanism (e.g. ODA Award, etc):

PI Email: Co-PI Email:

Project Start Date: Year One Total Cost:

Project End Date: Grand Total Cost:

New York State Applicant Organization (NYO):

NYO Name: Contracts or Grants Official (GO):

GO Last Name:

GO First Name:

GO Title:

NYO Mailing Address:

NYO Street1: GO Street1:

NYO Street2: GO Street2:

NYO City: GO City:

NYO State: NY NYO Zip: GO State: NY GO Zip:

NYO Phone: GO Phone:

NYO Fax: GO Fax:

NYO Email: GO Email:

Principal Investigator/Program Director/Sponsor:

PI Last Name: PI First Name: Co-PI Last Name: Co-PI First Name:

PI Middle Initial: PI Degree: Co-PI Middle Initial: Co-PI Degree:

PI Organization: Co-PI Organization:

PI Department: Co-PI Department:

PI Mailing Address (Street, MS., P.O. Box, City, State, Zip):

PI Street1: Co-PI Street1:

PI Street2: Co-PI Street2:

PI City: Co-PI City:

PI State: NY PI Zip: Co-PI State: NY Co-PI Zip:

PI Phone: Co-PI Phone:

PI Fax: Co-PI Fax:



Department of Health

Wadsworth Center

Attachment 3: Application Forms 1-5 (continued)

Form 2 – Staff, Collaborators, Consultants and Contributors

Last Name	First Name	Title	Institutional Affiliation	Role in Project
				PVPD
				PVPD PI (Sponsor) Co-PI/Co-PD Research Scientist Co-Investigator Collaborator Mentor Consultant Postdoc Applicant Fellow PVPD
				PVPD

Application Form 2



Attachment 3: Application Forms 1-5 (continued)

Form 3 Acronyms and Abbreviations Used in Application

Acronym	Full Text/Definition/Description

Application Form 3



Department
of Health

Wadsworth
Center

Attachment 3: Application Forms 1-5 (continued)

Form 4 - Lay Abstract

Lay Abstract

Application Form 4

Research Category

Rehabilitation
Cellular Regeneration & Therapeutics

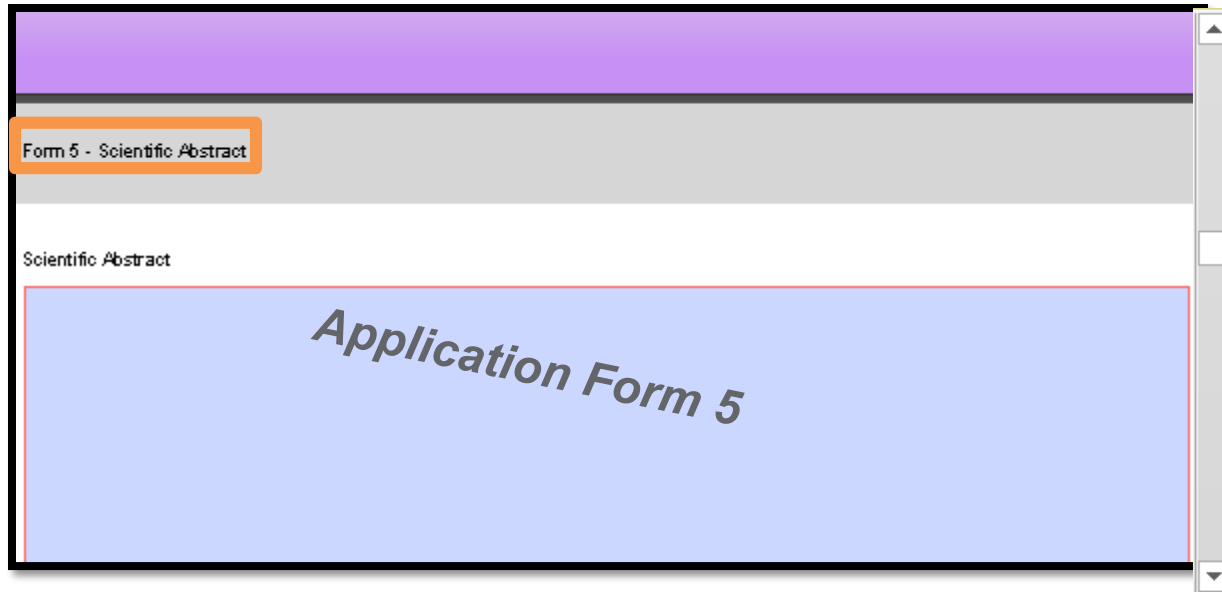
Comments



Department
of Health

Wadsworth
Center

Attachment 3: Application Forms 1-5 (continued)



The screenshot shows a web browser window with a purple header bar. Below the header is a grey bar containing the text "Form 5 - Scientific Abstract", which is highlighted with an orange box. Underneath this is a white bar with the text "Scientific Abstract". The main content area is a large light blue rectangle with the text "Application Form 5" written diagonally across it. A vertical scrollbar is visible on the right side of the browser window.

Contains Confidential or
Proprietary Material

- ☐ No
☐ Yes

Comments



A large, empty light blue rectangular box intended for user comments.



Department
of Health

Wadsworth
Center

Attachment 4: Application Form 1-S

Form 1-S, Sub-Applicant Face Page

Project Title:

PI Name:

Principal Investigator/Program Director/Sponsor:

PI Last Name: PI First Name: Co-PI Last Name: Co-PI First Name:

Co-PI Middle Initial: Co-PI Degree:

Overall Project Co-PI: ☐ Yes ☐ No

PI Organization:

PI Department:

Co-PI Organization:

Co-PI Department:

PI Mailing Address (Street, MS, P.O. Box, City, State, Zip):

PI Street1: PI Street2: PI City: PI State: PI Zip:

PI Phone: PI Fax: PI Email:

Co-PI Mailing Address (Street, MS, P.O. Box, City, State, Zip):

Co-PI Street1: Co-PI Street2: Co-PI City: Co-PI State: Co-PI Zip:

Co-PI Phone: Co-PI Fax: Co-PI Email:

File of Grant Data:

Project End Date:

Grand Total Costs:

Year One Total Costs:

Sub-Applicant Organization (SAO):

SAO Name:

Contractor or Grants Official (GO):

GO Last Name: GO First Name: GO Title:

SAO Mailing Address:

SAO Street1: SAO Street2: SAO City: SAO State: SAO Zip:

SAO Phone: SAO Fax: SAO Email:

GO Mailing Address:

GO Street1: GO Street2: GO City: GO State: GO Zip:

GO Phone: GO Fax: GO Email:

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway*



**Department
of Health**

**Wadsworth
Center**

Attachment 5: Application Form 6 (Years 2-3)

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway
as a PDF and
XLS or XLSX file*

CONTRACTOR SFS PAYEE NAME:

YEAR TWO CONTRACT PERIOD From: 11/1/2018 To: 10/31/2019

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH %	OTHER FUNDS	TOTAL
1. Personal Services					
a) Salary	\$ 0	0	0	0	\$ -
b) Fringe	\$ -	0	0	0	\$ -
Subtotal	\$ -	0	0	0	\$ -
2. Non Personal Services					
a) Contractual Services	\$ -	0	0	0	\$ -
b) Travel	\$ -	0	0	0	\$ -
c) Equipment	\$ -	0	0	0	\$ -
d) Space/Property & Utilities	\$ -	0	0	0	\$ -
e) Operating Expenses	\$ -	0	0	0	\$ -
f) Other	\$ -	0	0	0	\$ -
Subtotal	\$ -	0	0	0	\$ -
TOTAL	\$ -	0	0	0	\$ -

RFA Number: # 1610070403
Page 1 of 5, Attachment B-1 - Expenditure Based Budget

FORM 6 - EXPENDITURE BASED BUDGET

☐ BUDGET ☐ JUSTIFICATION

BUDGET YEAR (YEAR 5): From: 11/1/2021 To: 10/31/2022

CATEGORY OF EXPENSE	BUDGETED
1. Personal Services	
a) Salary	
1. 1.	\$ -
2. 2.	\$ -
3. 3.	\$ -
4. 4.	\$ -
5. 5.	\$ -
6. 6.	\$ -
7. 7.	\$ -
8. 8.	\$ -
9. 9.	\$ -
10. 10.	\$ -
11. 11.	\$ -
12. 12.	\$ -
13. 13.	\$ -
14. 14.	\$ -

BUDGET JUSTIFICATION

Tab 1, Total Budget

Tab 2, Justification



**Department
of Health**

**Wadsworth
Center**

Attachment 6: Application Form 6-S (Years 1-3)

FORM 6-S - EXPENDITURE BASED BUDGET
YEAR ONE SUMMARY (SUBCONTRACT #1)

PROJECT NAME: Translational Research Projects (TRPs) in Spinal Cord Injury (Rd 2)

SUBCONTRACTOR #1 NAME:

YEAR ONE CONTRACT PERIOD From: 11/1/2017 To: 10/31/2018

Sub-Applicant Budget

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH %	OTHER FUNDS	TOTAL
1. Personal Services					
a) Salary	\$ -	0	0	0	\$ -
b) Fringe	\$ -	0	0	0	\$ -
Subtotal	\$ -	0	0	0	\$ -
2. Non Personal Services					
a) Contractual Services	\$ -	0	0	0	\$ -
b) Travel	\$ -	0	0	0	\$ -
c) Equipment	\$ -	0	0	0	\$ -
d) Space/Property & Utilities	\$ -	0	0	0	\$ -
e) Operating Expenses	\$ -	0	0	0	\$ -
f) Other	\$ -	0	0	0	\$ -
Subtotal	\$ -	0	0	0	\$ -
TOTAL	\$ -	0	0	0	\$ -

RFA Number: # 161007043
Page 1 of 5, Attachment B-1 - Expenditure Based Budget

FORM 6-S - EXPENDITURE BASED BUDGET
PERSONAL SERVICES DETAIL

POSITION TITLE	ANNUALIZED SALARY PER	STANDARD WORK	PERCENT OF	NUMBER OF	TOTAL
SUBCONTRACT #1 TOTAL BUDGET					

SUBCONTRACT #1 JUSTIFICATION SUBCONTRACT

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway
as a PDF and
XLS or XLSX file*



**Department
of Health**

**Wadsworth
Center**

Attachment 7: Application Forms 7-12

7. Biographical Sketch
8. Facilities and Resources
9. Training/Career Development Plan
10. Workplan Narrative
11. Human Subjects Form
12. Vertebrate Animals Form

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway*



**Department
of Health**

Wadsworth
Center

Attachment 7: Application Forms 7-12

Form 7 – Biographical Sketch

NAME: _____

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. Contribution to Science

D. Research Support



Department
of Health

Wadsworth
Center

Attachment 7: Application Forms 7-12

Form 8 – Facilities and Resources

Laboratory:

Clinical:

Animal:

Computer:

Office:

Other:

MAJOR EQUIPMENT:

Application Form 8

2



Department
of Health

Wadsworth
Center

Attachment 7: Application Form 9

Introductory overview of the fellow and mentorship

- A. Goals for Fellowship Training and Career (one page)
- B. Activities Planned Under This Award (one page)
- C. Responsible Conduct of Research (one page)

***Form 9 has a
5 page limit***

Mandatory Sponsor's Letter and Institutional Support (to be placed in the appendix of the application)



**Department
of Health**

**Wadsworth
Center**

Attachment 7: Application Forms 7-12

- A. Specific Aims
- B. Significance
- C. Background and Preliminary Results
- D. Research Design and Methods
- E. Literature Cited

***FORM 10
has a 7 PAGE
LIMIT for
Sections A-D***



Attachment 7: Application Forms 7-12

Form 11 – Human Subjects
SECTION A:

1. Applicant/Sub-applicant Institution:

2. Are Human Subjects involved? ☐ Yes ☐ No

3. Is the project Exempt from federal regulations? ☐ Yes ☐ No

4. If YES to #3, what is the Exemption number? ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

5. If NO to #3, is the IRB review Pending? ☐ Yes ☐ No

6. IRB Approval Date (leave blank only if Yes to #5):

7. IRB Protocol Approval Number (leave blank only if Yes to #5):

SECTION B – NARRATIVE (use additional pages if necessary)

Application Form 11

5

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway*



**Department
of Health**

**Wadsworth
Center**

Attachment 7: Application Forms 7-12

Form 12 – Vertebrate Animals

SECTION A:

1. Applicant/Sub-applicant Institution:

2. Are Vertebrate Animals involved? ☐ Yes ☐ No

3. Is the IACUC Review Pending? ☐ Yes ☐ No

4. IACUC Approval Date (leave blank only if YES to #3):

5. IACUC Protocol Approval Number (leave blank only if YES to #3):

SECTION B – NARRATIVE (use additional pages if necessary)

Application Form 12

6

*Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway*

*Upload in the
Program Specific
Questions
Section of the
Grants Gateway*



**Department
of Health**

**Wadsworth
Center**

Attachment 8: Application Form 13

***Download in the
Pre-Submission
Uploads Section
of the Grants
Gateway***

***Upload in the
Program Specific
Questions
Section of the
Grants Gateway***

KEY PERSONNEL:		Name (Last, First MI.)									
<input type="checkbox"/> -- check here if this person has no other source of Active or Pending support.											

ACTIVE AWARDS											
Title	Description	Principal Investigator	Award Number	Funding Agency	Start Date	End Date	Professional Effort (%)	Small Cancer Related?	If yes, include the specific aims.	Overlap?	If yes, describe the intended resolution.
Total Professional Effort:							0.0%				

PENDING AWARDS											
Title	Description	Principal Investigator	Application Number	Funding Agency	Start Date	End Date	Professional Effort (%)	Small Cancer Related?	If yes, include the specific aims here.	Overlap?	If yes, describe the intended resolution.
Total Effort (Active & Pending):							0.0%				

See RFA pg. 14

Attachment 10: Vendor Responsibility Attestation

ATTACHMENT 9
Vendor Responsibility Attestation

To comply with the Vendor Responsibility Requirements outlined in Section IV, Administrative Requirements, L. Vendor Responsibility Questionnaire, I hereby certify:

Choose one:

☐ An on-line Vendor Responsibility Questionnaire has been updated or created at OSC's website: <https://portal.osc.state.ny.us> within the last six months.

☐ A Vendor Responsibility Questionnaire is not required due to an exempt status. Exemptions include governmental entities, public authorities, public colleges and universities, public benefit corporations and Indian Nations.

Signature of Organization Official: _____

Print/type Name: _____

Title: _____

Organization: _____

Date Signed: _____

***Download &
Upload in the
Pre-Submission
Uploads Section
of the Grants
Gateway***



**Department
of Health**

**Wadsworth
Center**

Attachment 11: Minority & Women-Owned Business Enterprise Requirement Forms

See RFA pg. 13

- MWBE Utilization Plan (3 pages)
- MWBE Utilization Waiver Request
- Staffing Plan
- Equal Opportunity Policy Statement
- Instructions

MWBE Form #1
New York State Department of Health
MWBE UTILIZATION PLAN

Applicant/Grantee Name: <input type="text"/>	
Vendor ID: <input type="text"/>	Telephone No. <input type="text"/>
RFA/Contract Title: <input type="text"/>	RFA/Contract No. <input type="text"/>

Description of Plan to Meet MWBE Goals (Use pages 2-3 to provide specific M and W subcontractor information)

Attachment 11

PROJECTED MWBE USAGE		%	Amount
1. Total Dollar Value of Eligible Expenditures on Budget (Does not include Personal Services, Fringe, Rent, Space, Utilities)	<input type="text"/>		\$ <input type="text"/>
2. MBF Goal Applied to Eligible Expenditures	<input type="text"/>		\$ <input type="text"/>
3. WBE Goal Applied to Eligible Expenditures	<input type="text"/>		\$ <input type="text"/>
4. MWBE Combined Eligible Expenditure Totals*	<input type="text"/>		\$ <input type="text"/>

*Making false representation or including information evidencing a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Firms that do not perform commercially useful functions may not be counted toward MWBE utilization.

*If less than the stated goal in RFA, Form #2 is required.

Form #1 - Page 1 of 3

Page 2 of 11

Revised: 4/2015

Download & Upload in the Pre-Submission Uploads Section of the Grants Gateway






Online Components of the Application



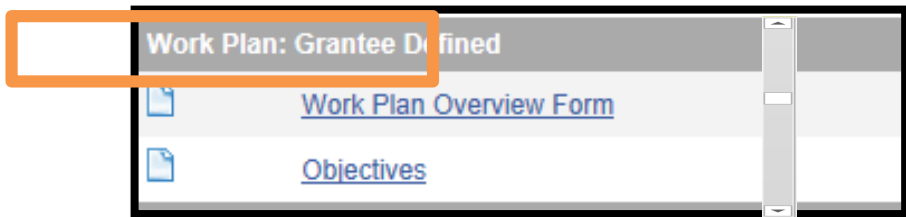
**Department
of Health**

Wadsworth
Center

Online Workplan






 [Menu](#)  **Forms Menu**  [Status Changes](#)  [Management Tools](#)  [Related Documents and Messages](#)

Forms Menu → Scroll down to Work Plan: Grantee Defined



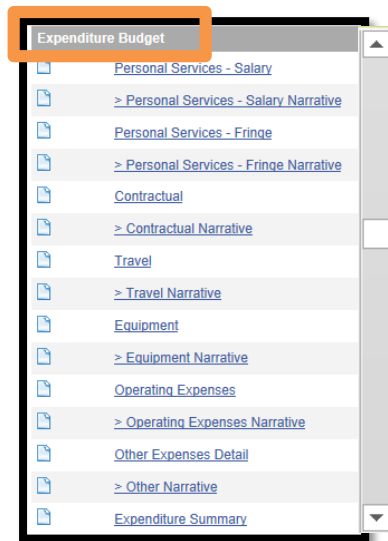
- Complete the Work Plan Overview Form and
- Objectives

Online Budget and Justification (Year 1)

 [Menu](#)  **Forms Menu**  [Status Changes](#)  [Management Tools](#)  [Related Documents and Messages](#)

Forms Menu → Scroll down to Expenditure Budget Section

- Complete each form and narrative of the Online Budget for Year One



Review and Award Process



Department
of Health

Wadsworth
Center

Review and Award Process

- Administrative Pass/Fail
- Peer Review Process
- Spinal Cord Injury Research Board (SCIRB) Review
- Contract Execution



Department
of Health

Wadsworth
Center

Review Criteria

1. Fellow and Development Plan **30%**
2. Workplan **25%**
3. PI/sponsor, Mentor(s) and Environment **25%**
4. Budget **20%**



Department
of Health

Wadsworth
Center

Debriefing

- All applicants may request a debriefing by sending an email to scirb@health.ny.gov.
- Requests must be received no later than 15 business days from date of award or non-award announcement.



Your Questions



**Department
of Health**

Wadsworth
Center

Grants Gateway Overview



Department
of Health

Wadsworth
Center

<https://grantsgateway.ny.gov/>



The screenshot shows the homepage of the New York State Grants Gateway. At the top, there is a header with the "New York State Grants Gateway" logo and a "Grants Gateway Login" link. Below the header, the main content area is titled "Grant Opportunity Portal - Home". A "WELCOME TO THE GRANTS GATEWAY" section follows, explaining that the portal is a one-stop shop for grant funding opportunities. It also mentions the "Grantee Document Vault" for existing grantees and potential applicants. A "Check back regularly" note mentions integration with the Statewide Financial System. Below this, a "For additional information" link points to the Grants Reform Website. The main navigation area consists of four blue boxes: "BROWSE", "SEARCH", "NOTIFICATION", and "REGISTRATION". Each box contains a brief description of its function and a "Click here" link with a right arrow icon. At the bottom, a footer note directs users to the "Contract Reporter" for a complete listing of procurement and grant opportunities.

New York State
Grants Gateway

Grants Gateway Login

SHOW HELP

Grant Opportunity Portal - Home

Welcome to the Grants Gateway

The **Grant Opportunity Portal** is online and available to the public, providing a one-stop shop for anyone interested in locating grant funding opportunities with State agencies.

The **Grantee Document Vault** is also available, allowing existing grantees and potential applicants to store key organizational information in a single secure online location for use by all State agencies. In order to use the Document Vault, a grantee must register as a user on the system and provide information on a Delegated Administrator who will manage their user account. This requires submission of a Registration form and accompanying organizational diagram. Note that your Registration form must be signed, notarized and mailed to Gateway Administrators. Plan accordingly to avoid potential delays in applying for upcoming grant opportunities.

Check back regularly as efforts to integrate with the Statewide Financial System are underway.

For additional information see the Grants Reform Website. www.grantsreform.ny.gov

BROWSE

Looking for a listing of funding opportunities? Use the Browse feature to get started.

[Browse Now!](#)

SEARCH

Looking for information about a specific funding opportunity? Use the Search feature to narrow your focus.

[Search Now!](#)

NOTIFICATION

Want to be kept informed of upcoming and available funding opportunities? Provide your email address, and identify the types of grants that interest you.

[Sign-up Now!](#)
[Already Signed-up?](#)
[Click here to update preferences.](#)

REGISTRATION

If you are already a vendor with NYS or are interested in becoming a vendor request access here.

[Request Access Now!](#)

For a complete listing of all New York State procurement and grant opportunities, please visit the [Contract Reporter](#).

Grants Gateway FAQ

1. How do I apply for an opportunity?
2. Where's a copy of the RFA Attachments?
3. How do I retrieve an application I've already started?
4. How do I retrieve the Q & A document?

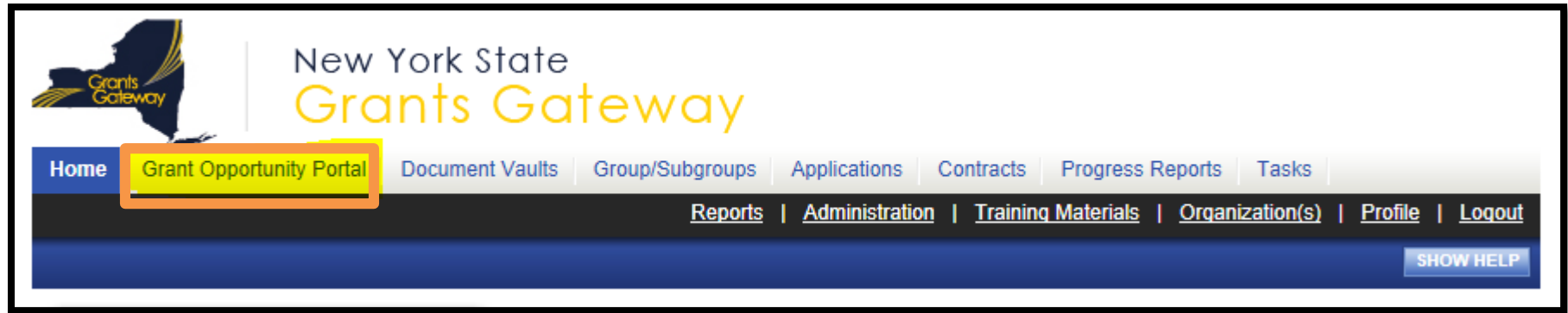


Department
of Health

Wadsworth
Center

Q1: How do I apply for an Opportunity in the Grants Gateway?

- You must be registered in the Grants Gateway to apply
 - See RFA, Section IV. M.
 - Grantee Quick Start Guide <https://grantsreform.ny.gov/Grantees>
 - Delegated Administrator



- Login
- Click on the Grants Opportunity Portal tab
- Search using the keywords (Translational), and select the Department of Health as the Funding Agency
- Click on the Grant Opportunity name
- Click Apply for Grant Opportunity to start an application



APPLY FOR GRANT OPPORTUNITY

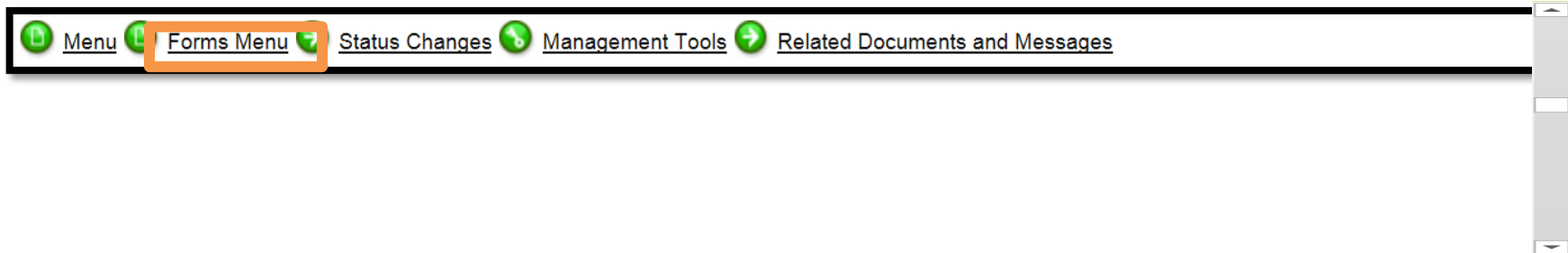
<https://grantsgateway.ny.gov>



Department
of Health

Wadsworth
Center

Q2: Where do I download the RFA Attachments?



- Login
- Start an application or retrieve an application that you already started
- Click on the Forms Menu
- Scroll down to Click on Pre-Submission Uploads
- Download each attachment document template

Click on each document template to download each attachment

PRE-SUBMISSION UPLOADS

Instructions:

1. Select the **Browse** button to locate an upload.
2. Select the **Save** button above to load it into the system.
3. If the Grant Opportunity you are applying for requires that a specific document be uploaded, a link to the Document Template will appear under the upload row. Click the link to download and save the Document Template to your computer. Once you have filled out the Document Template you can use the associated **Upload** row to upload the document as part of your application.

Only upload the completed Vendor Responsibility Attestation (Attachment 9), Minority & Women-Owned Business Enterprise Requirement Forms (Attachment 10) and the optional Letter of Intent Form (Attachment 1) and Conflict of Interest Form (Attachment 8) in this Pre-Submission Uploads section. All other completed forms must be uploaded in the Program Specific Questions section.

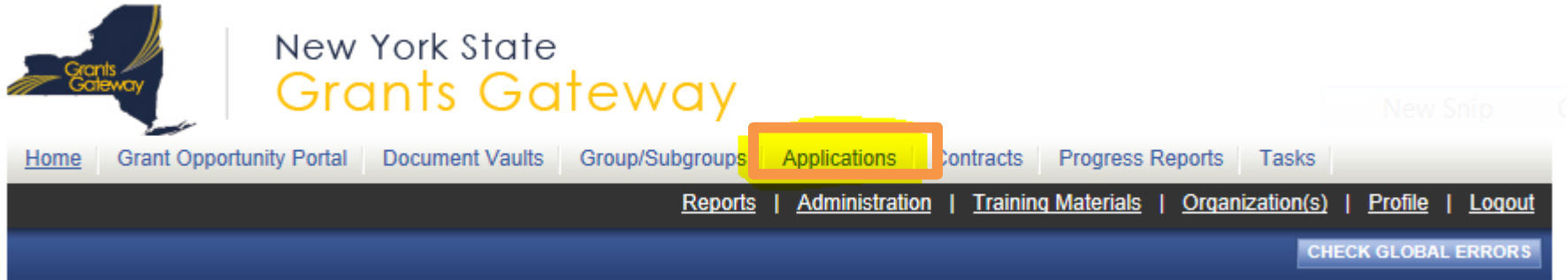
Attachment 1 - Letter of Intent Form

The prospective applicant institution is strongly encouraged to complete and submit a Letter of Intent. This form will be used to develop the review panel in a timely manner. Letters of Intent should be submitted via the Grants Gateway in the Pre-Submission Uploads section of the online application. The file name should include applicant organization and PI names. A copy must also be e-mailed to scirb@health.ny.gov. Please ensure that the RFA number, organization name and PI name are noted in the e-mail subject line. Submit the Letter of Intent via both formats by the date posted on the cover of the RFA.

Browse...

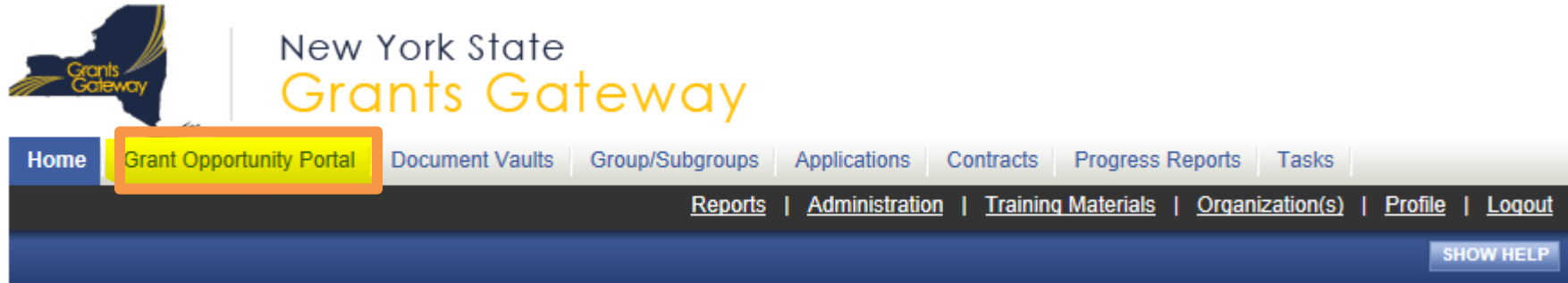
Document Template [Click here](#)

Q3: How do I retrieve an Application I've already started?



- Login
- Click on the Applications link located at the top of your home screen
- Enter search criteria to locate the application
- Click on the Application number to restart the application

Q4: How do I retrieve the Q&A document?



- Click on Grant Opportunity Portal
- Search for Opportunities in the Portal using the keywords (Translational), and select the Department of Health as the Funding Agency.
- Click on the Grant Opportunity name
- Full Document details are listed on the Grant Opportunity Profile, which includes a Questions and Answers link

<https://grantsgateway.ny.gov>



**Department
of Health**

Wadsworth
Center

Your Questions



**Department
of Health**

Wadsworth
Center



**Department
of Health**

**Wadsworth
Center**

Thank you!!

July 5, 2018