RFA # 17607
Grants Gateway # DOH01-PART3-2019

Projects to Accelerate Research Translation (PART) and Innovative, Developmental or Exploratory (IDEA) in Spinal Cord Injury (Round 3)

QUESTIONS and ANSWERS

February 21, 2018 – March 13, 2018
Including an applicant conference on March 6, 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 2/28/18. The Letter of Intent is not mandatory but is strongly encouraged. See Section IV.C. of the RFA for submission instructions. Letters of Intent will still be accepted after the deadline.

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. 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.

5. 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.

Project Narrative / Workplan Outcomes (RFA Section III)

6. I listed a Spinal Cord Research Injury Board (SCIRB) member as a Co-PI on my LOI. He will not be participating in the proposed research and will not be included in the application. Do I need to make a notification regarding this situation?

   A. No, just be sure the SCIRB member is not involved in the proposed research or named in your application.

7. The SCIRBs mission appears to be primarily targeting research focused on curing SCI, reversing paralysis or preventing damage occurring during the acute phases of the injury. Will submissions that will add to the body of research related to physical rehabilitative interventions in the post-acute phase of recovery be considered under this RFA?

   A. Research projects related to physical rehabilitative interventions are currently being funded and will be considered under this RFA. Please note that on the bottom of Form 4 there is drop down box to indicate if the application's research category is "Rehabilitation" or "Cellular Regeneration & Therapeutics". It would appear your proposed research fits the funding mechanism. You can see the subject matter of applications that are currently being funded here:

      https://www.wadsworth.org/extramural/spinalcord/research-support

8. Why are there two workplans in the application?

   A. The Workplan Narrative – Form 9, 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 consistency between the two is important.

9. 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.

Eligibility (RFA Section II)

10. Can I apply for both an IDEA and a PART award?

   A. Yes, as long as they are separate projects. However, if a PI submits more than one PART and/or more than one IDEA application, all those PI's applications will be disqualified.

11. Can I submit two PART applications, one as PI and the other as Co-PI? Can a PI on her/his own application be a collaborator on an application that I am listed as the PI?

    A. Yes, as long as they are separate projects. You cannot be a PI on two PART applications. The same is true of IDEA applications. A PI can be a collaborator on other applications.

12. Will participating in more than one application impact the score of an application?

    A. It could. The peer review panel is charged with identifying potential overlap (see RFA Section V.C). If scientific, budgetary or time commitment overlap among the pending and active research is of potential concern, the applicant should clearly delineate the differences among the projects using Application Form 12 – Other Support. Section V.F. of the RFA outlines the specific evaluation criteria and weights; the criteria do include assessment of the availability of time and resources to accomplish the project.

13. I am a business owner. Can my company apply for funding under this RFA?

    A. No, not directly. Eligible institutions are not-for-profit or governmental organizations in New York State. A for-profit organization may be a subcontractor in collaboration with an eligible organization.

14. 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.

<u>PIs, Co-PIs and Co-Investigators (RFA Attachment 2 re: Application Forms 1, 1-S and 2)</u>

15. What's the difference between a co-investigator and a Co-PI?

    A. A Co-PI is designated by the PI as an individual who has equal responsibility and authority for ensuring the completion of the entire project. A co-investigator may be responsible for a specific component of the research project. The PI is the point of contact for all aspects of the application and contract. See RFA Attachment 2 for further delineation.

16. What if my Co-PI is from a different institution?

    A. That is fine. See the instructions (RFA Attachment 2) for Forms 1 and 1-S for further details.

17. 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.

18. 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.

19. 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.

Subcontractors in the Application

20. Is there a limit to the percentage of work or the amount of funding that can be subcontracted to out of state collaborators?

    A. No limit is imposed by the RFA. Please note that the peer reviewers are required to note any excessive and/or unnecessary costs in budgets. Further, the Spinal Cord Injury Research Board's members will receive all applications with critiques and they may have an opinion as to whether or not the amount subcontracted is reasonable.

21. Are we required to provide a copy of the subcontract, or the subcontract indirect cost rate, as part of the application or at any time after award?

    A. Draft subcontracts in excess of $100,000 will be requested at time of award. See the NYS Master Grant Contract Section IV.B. The sub-applicant indirect cost rate need not be submitted.

22. Do sub-applicants/subcontractors need to be registered in the NYS Grants Gateway, be pre-qualified and have an SFS Vendor ID number?

    A. Sub-applicants are not required to do so. However, at time of award, the State may require the applicant/sub-applicant to provide information the State needs to determine whether a proposed subcontractor is a responsible vendor. See the NYS Master Grant Contract Section IV.B.

23. If proposed work is to be performed with collaborators at the applicant's institution, is a subcontract required?

    A. No. These expenses should be included in the applicant's budget.

Submitting the Application

24. 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.

25. 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 4pm on April 18, 2018.

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

    A. Applicants should access the guides, videos and training opportunities available via the Grants Reform website at: www.grantsreform.ny.gov. Technical questions should be directed to the DOH contact listed on the cover of the RFA up until the application deadline. For application completion, policy, and registration questions, contact the Grants Team at: email: grantsgateway@its.ny.gov or phone: 518-474-5595 Monday thru Friday 8am to 4:30pm. For technical issues regarding the NYS Grants Gateway, contact the Gateway Help Desk, Monday-Friday from 8am – 8pm at 1-800-820-1890 or helpdesk@agatesoftware.com.

27. 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 watch the training videos provided on the NYS Grants Gateway website.

28. I accidentally started a duplicate application in the NYS Grants Gateway. How do I cancel the duplicate application?

    A. Only a "Grantee System Administrator" or "Grantee Contract Signatory" role can cancel an application. They will have to log into the NYS Grants Gateway go into the application and in the Status Changes section, where they would submit the application there is an option to cancel the application. Just apply that status and it will be cancelled.

29. 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. The application should be submitted more than an hour before it is due in case there are technical problems or global errors with the submission.

30. 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.

31. 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 files are not uploaded you will receive an error message describing what is missing. NOTE: the Grants Gateway does not assess the content or file format of an upload, only if a file upload was successful.

<u>Application Forms</u>

32. Regarding Forms 10 and 11, can IRB and IACUC approvals be pending before signing the contract?

    A. Yes, these approvals may be pending until the proposed research begins. Our contract management staff will request the approved protocols just prior to executing the contract.

33. The biographical sketch form looks very similar to the form the NIH uses. Can I use my NIH biographical sketch form?

    A. If you do not use the form provided in the RFA you will be penalized 0.1 point. Use only the forms provided to avoid being penalized.

34. 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. Note that if a completed fillable pdf is not submitted with your application a 0.1 penalty will be applied.

35. 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. The exceptions are RFA Attachments 1, 9, 10 and 11, which 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 pages make it

difficult for the reviewers to navigate the complete application and have resulted in different versions of the file being uploaded in those two locations. This can adversely impact the final score of the application.

36. 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 7-11). The biographical sketches (using Form 7) of other collaborators may be included in the appendices. See RFA Attachment 2 for further details.

37. If an application will include an unpaid consultant, does that application need to include an Other Support form for that consultant?

    A. The instructions state: "Provide the current information requested for all of the PI/PD and Co-PI/Co-PD(s) and key personnel on all existing and pending support." If the consultant is considered key personnel, then yes include the consultant in the other support form. It may be useful for the peer reviewers to see that the unpaid consultant has the time, as evidenced in the Other Support form, to dedicate to the project.

Budget

38. 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 Reform website at: www.grantsreform.ny.gov and RFA Attachment 2.

39. 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.

40. Are there salary limits for PIs, postdocs or graduate students?

    A. The maximum salary is limited to $199,700 per person in each budget year and is not adjustable as the federal salary cap changes.

41. 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.

42. 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. See RFA Attachment 2 for details.

43. Can I budget for travel to the NYS Spinal Cord Injury Research Symposium?

A. Yes, support may be requested for travel and meeting costs (see RFA Attachment 2).

44. May I delete non-applicable tabs from the subcontractor budget forms (Form 6-S) before I print to a PDF?

A. After the deadline, the NYS Grants Gateway concatenates your application into one PDF file. This PDF file is sent for review by the review panel. To minimize blank pages from your application's concatenated PDF, you should delete unused Sub-applicant Budgets and Justifications.

45. 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.

46. Do we have to submit a budget for the first year or all years? Do we need to have budgets for sub-applicants? If we are submitting an IDEA application can we ignore the year 3 budget forms.

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. Year 3 budget forms can be ignored for IDEA applications.

47. 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.

Minority and Woman-Owned Business Enterprise Requirements

48. 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 11.

49. We cannot identify MWBE's on the https://ny.newnycontracts.com website that we 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 have to apply for an exemption.

50. Are the MWBE requirements applicable to subcontractor budget(s)?

    A. Yes, the MWBE requirements apply to the applicable subcontractor budget items.

Application Review and Award Process

51. 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 will recruit experts appropriate to the area of proposed research. If an LOI was not submitted, the Peer Review contractor will review the application submitted and recruit experts appropriate to the proposed research.

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Projects to Accelerate Research Translation (PART) and Innovative, Developmental or Exploratory (IDEA) in Spinal Cord Injury (Round 3) RFA Applicant Conference

March 6, 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. Grants Gateway Overview
6. Your Questions

Administrative Items

See RFA cover sheet & pg.4

Important Dates

Letter of intent due: 2/28/18

Substantive questions due: 3/13/18

Questions, answers and updates posted: 3/19/18

Applications due: 4/18/18 by 4PM EST

EMAIL
scirb@health.ny.gov

https://grantsgateway.ny.gov

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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. 5

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 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

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RFA Overview

SCIRB's Mission & Goal

Stimulate high-quality, innovative spinal cord injury (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.

Purpose of the PART

- Foster the translation of results from basic (preclinical) research into the next research phase

- Investigate a well-developed problem or research hypothesis focusing on cures for SCI paralysis or the prevention of paralysis following trauma

See RFA pg. 2-3

Successful PART Applications Should Propose

- Investigate a well-developed problem or research hypothesis focusing on cures for SCI paralysis or the prevention of paralysis following trauma.

  - Cohesive and sharply focused
  - At least one Translational aim/goal (animal or human studies)
  - Fundamental and applied approaches

Purpose of the IDEA

- Preliminary testing of novel or high-risk hypotheses
- Applying novel approaches and methods
- Challenging existing paradigms or developing new paradigms
- Considering an existing problem from a new perspective.

See RFA pg. 3

Successful IDEA Applications Should Propose

- A high likelihood that the results will yield the opportunity to apply for future funding from other sources.
  - Highly speculative, exploratory, or high-risk
  - Application or development of state-of-the-art technologies, tools or resources for SCI research
  - Innovative or developmental
  - Test new hypotheses based on research grounded in a non-SCI research area

See RFA pg. 1

Available Funds

Approximately
$5 million is available to
support approximately
five-thirteen (5-13)
PART & IDEA awards

See RFA pgs. 1,2 & 8

Anticipated Contract

Three (3) years for **PART**

- Anticipated Contact period: 5/1/2019 through 4/30/2022
- Annual direct costs are capped at $275,000 per year
  - Facilities and Administrative (F&A) costs up to 20% of modified total direct costs

Two (2) year for **IDEA**

- Anticipated Contact period: 5/1/2019 through 4/30/2021
- Annual direct costs are capped at $150,000 per year
  - Facilities and Administrative (F&A) costs up to 20% of modified total direct costs

See RFA pg. 2

Who May Apply?

- **Applicant** must be a New York State not-for-profit organization or governmental organization

- The eligible Principal Investigator (PI), 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 may only submit one (1) application for an IDEA award **and** one (1) application for a PART award.

See RFA pg. 2

Eligibility to Apply Also Includes the Following Items

- The PI/PD can not be restricted from receiving Public Health Service (PHS) funding or debarred by the United States Food and Drug Administration (FDA) or any other federal or New York State government entity (see RFA Section II.)

- The application cannot propose:
  - support for a research center,
  - support for a Phase III clinical trail, or
  - expansion of enrollment for an ongoing clinical trial

RFA Attachments 1-11

See RFA pg. 4

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

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

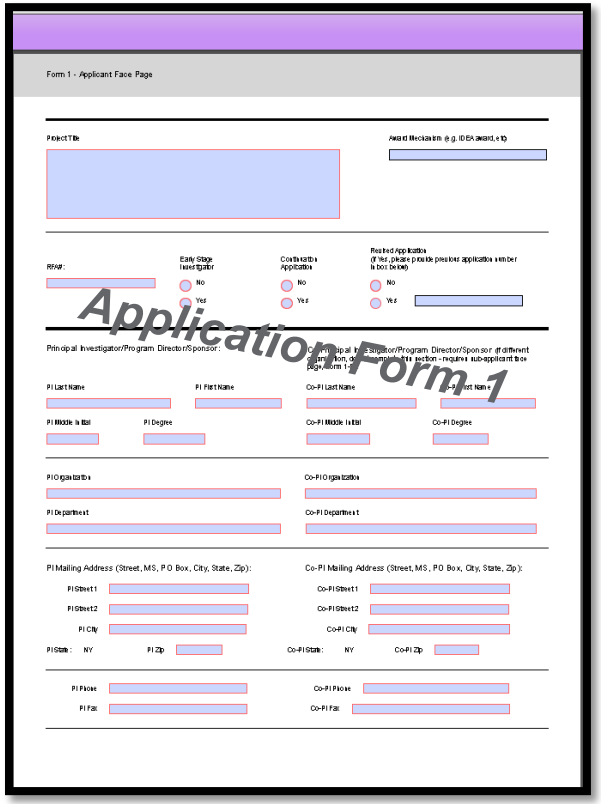
Attachment 3: Application Forms 1-5

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

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

Upload in the Program Specific Questions Section of the Grants Gateway

Attachment 3: Application Forms 1-5 (continued)


Form 1 - Applicant Face Page

Project Title

Award Mechanism (e.g. IDEA award, etc)

RFA#:

Early Stage Investigator

Continuation Application

Revised Application (If Yes, please provide previous application number in box below)

No Yes

Application Form 1

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, PO Box, City, State, Zip):

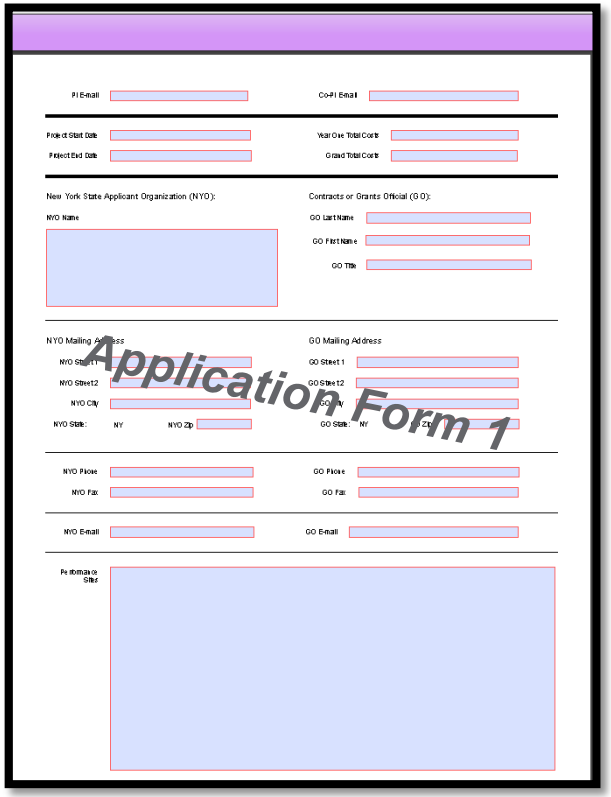
PI Street 1 PI Street 2 PI City PI State: NY PI Zip

Co-PI Mailing Address (Street, MS, PO Box, City, State, Zip):

Co-PI Street 1 Co-PI Street 2 Co-PI City Co-PI State: NY Co-PI Zip

PI Phone PI Fax

Co-PI Phone Co-PI Fax


PI E-mail Co-PI E-mail

Project Start Date Project End Date

Year One Total Costs Grand Total Costs

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 Street 1 NYO Street 2 NYO City NYO State: NY NYO Zip

GO Mailing Address

GO Street 1 GO Street 2 GO City GO State: NY GO Zip

Application Form 1

NYO Phone NYO Fax

GO Phone GO Fax

NYO E-mail GO E-mail

Performance Sites

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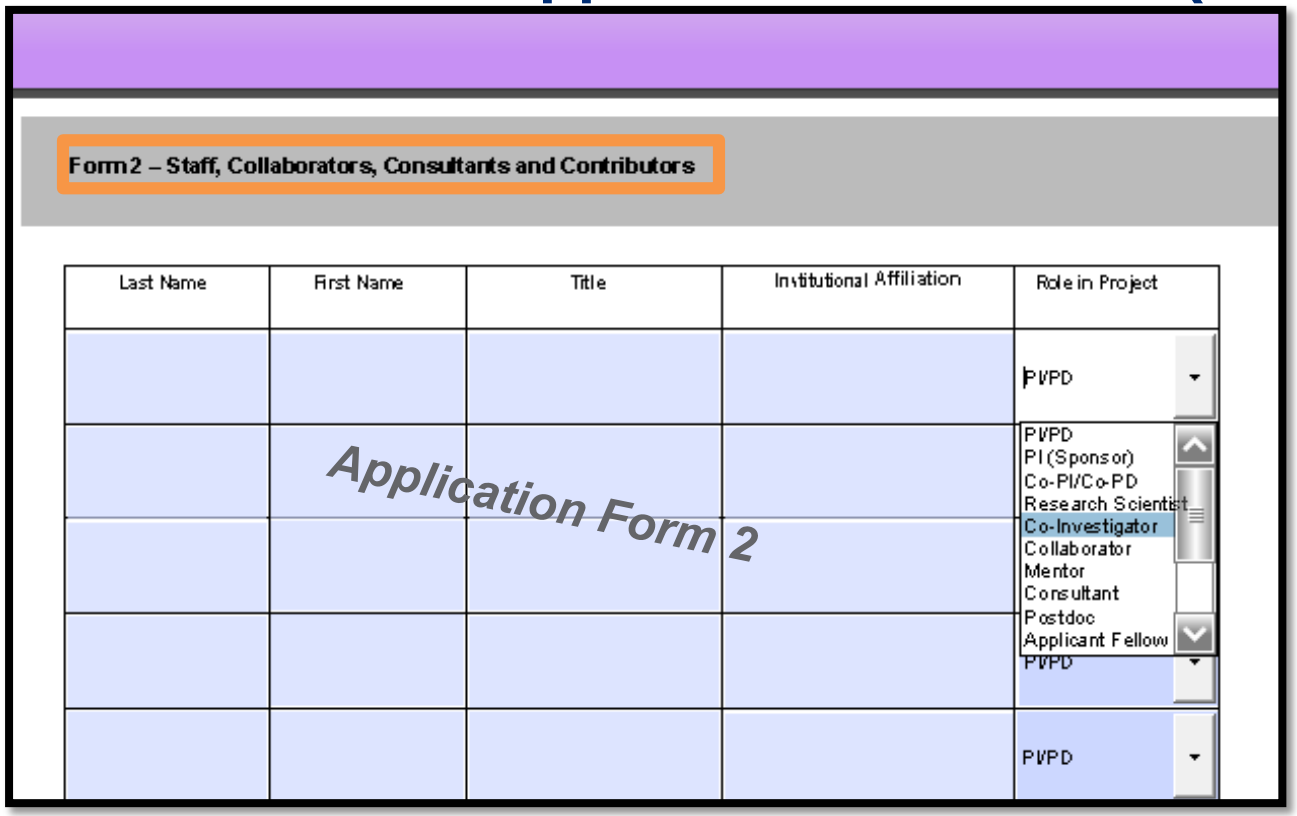
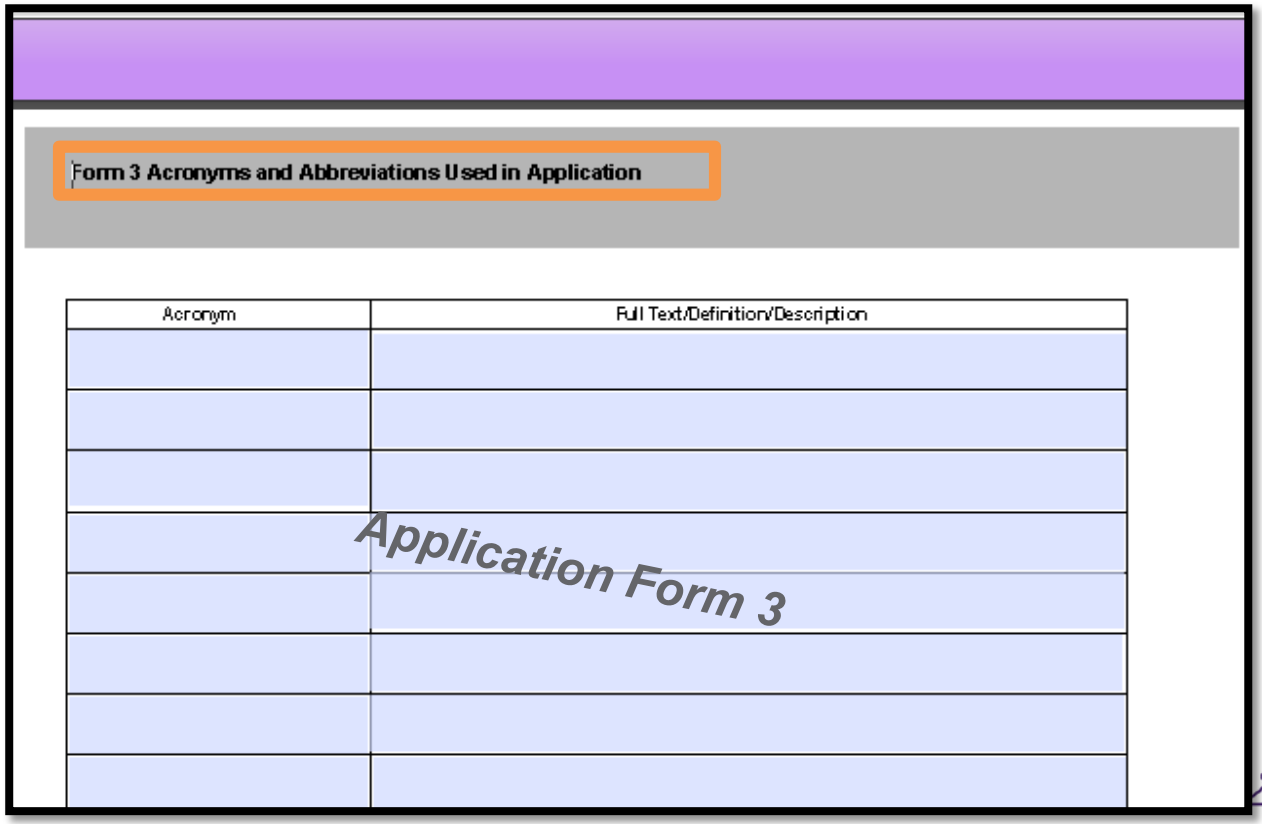
Attachment 3: Application Forms 1-5 (continued)



Attachment 3: Application Forms 1-5 (continued)



Form 3 Acronyms and Abbreviations Used in Application

Acronym	Full Text/Definition/Description

Application Form 3

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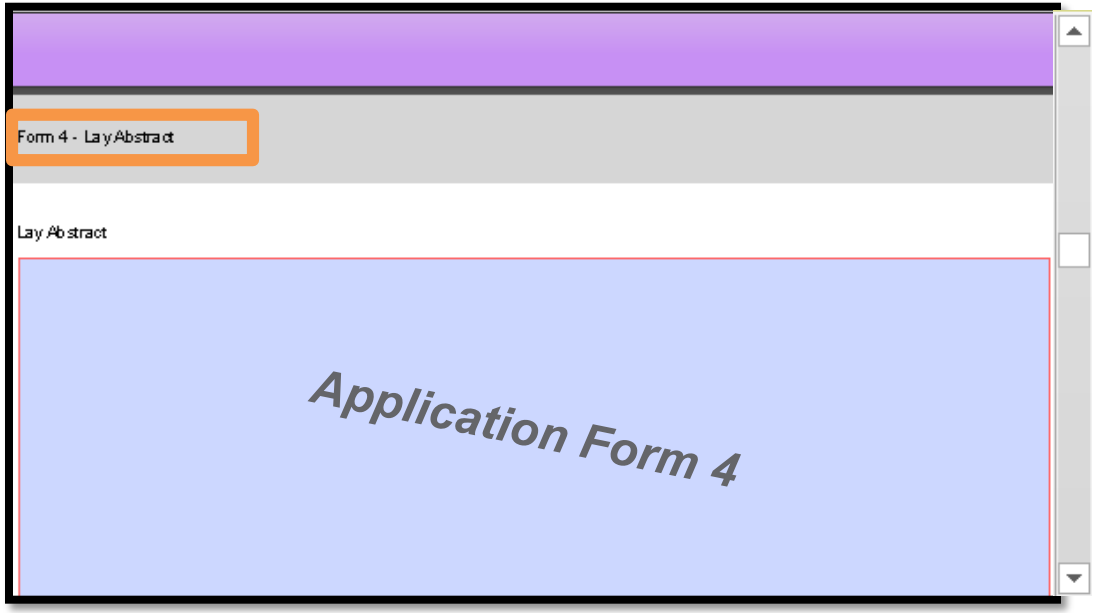
Attachment 3: Application Forms 1-5 (continued)



Research Category

Rehabilitation
Cellular Regeneration & Therapeutics

Comments

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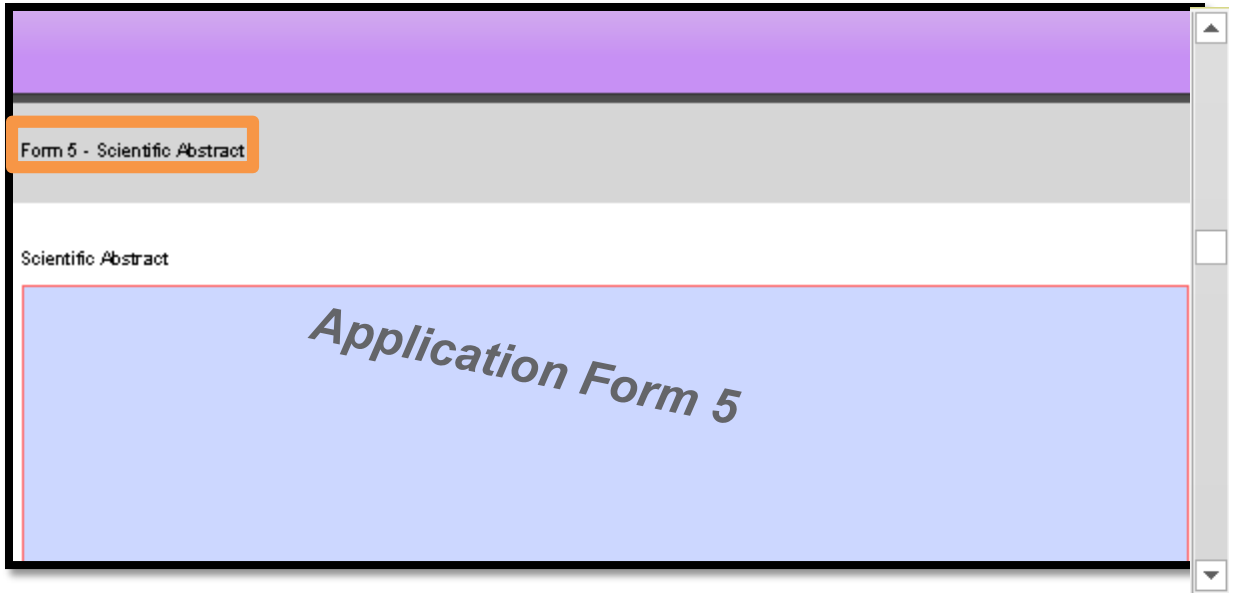
Attachment 3: Application Forms 1-5 (continued)



Contains Confidential or Proprietary Material

- No
- Yes

Comments

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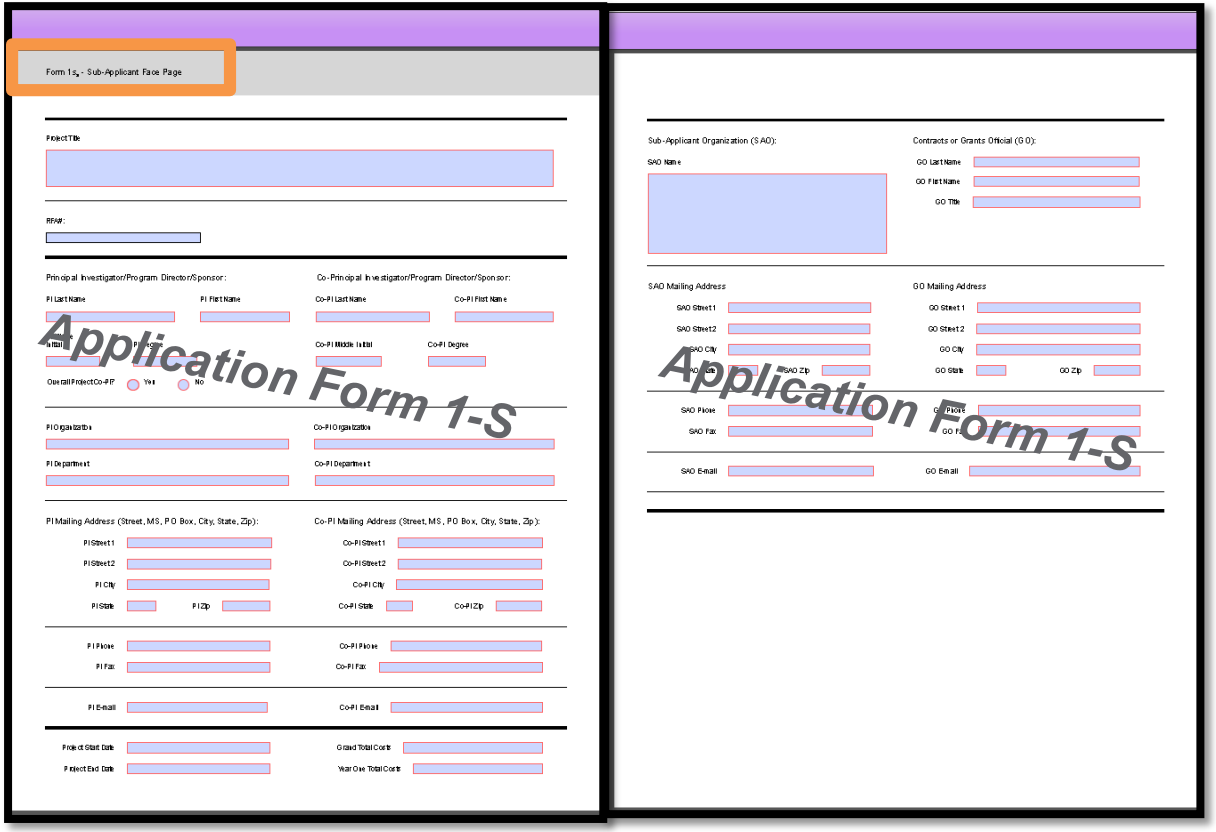
Attachment 4: Application Form 1-S



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

Upload in the Program Specific Questions Section of the Grants Gateway

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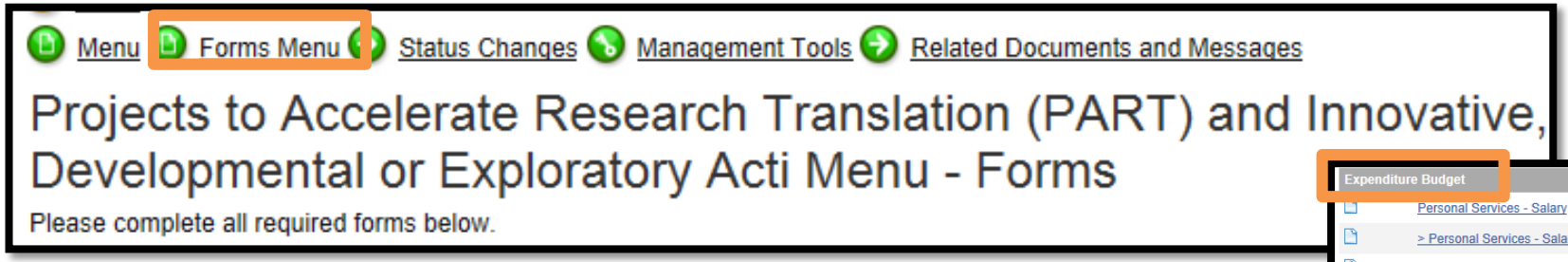
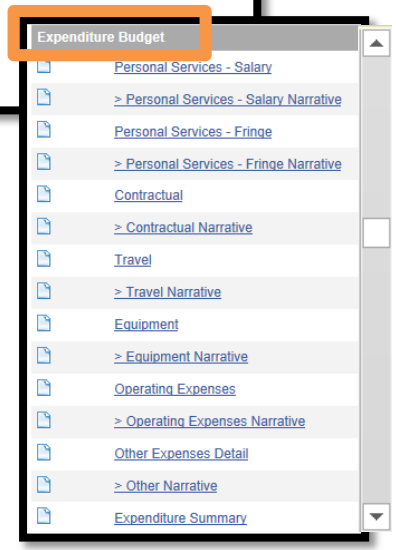
Online Budget and Justification (Year 1)

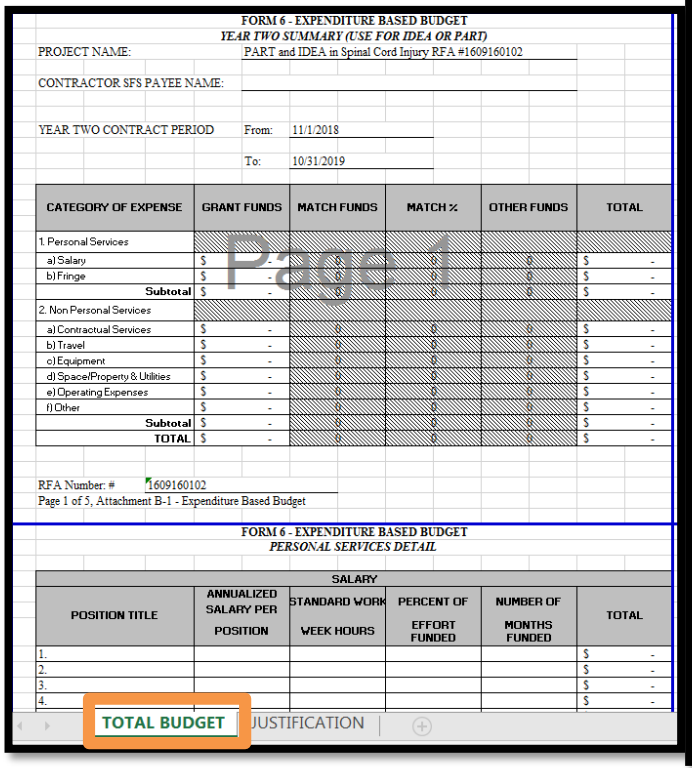




Forms Menu → Scroll down to Expenditure Budget Section

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

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



FORM 6 - EXPENDITURE BASED BUDGET
YEAR TWO SUMMARY (USE FOR IDEA OR PART)

PROJECT NAME: PART and IDEA in Spinal Cord Injury RFA #1609160102

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	$ -
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: # 1609160102

Page 1 of 5, Attachment B-1 - Expenditure Based Budget

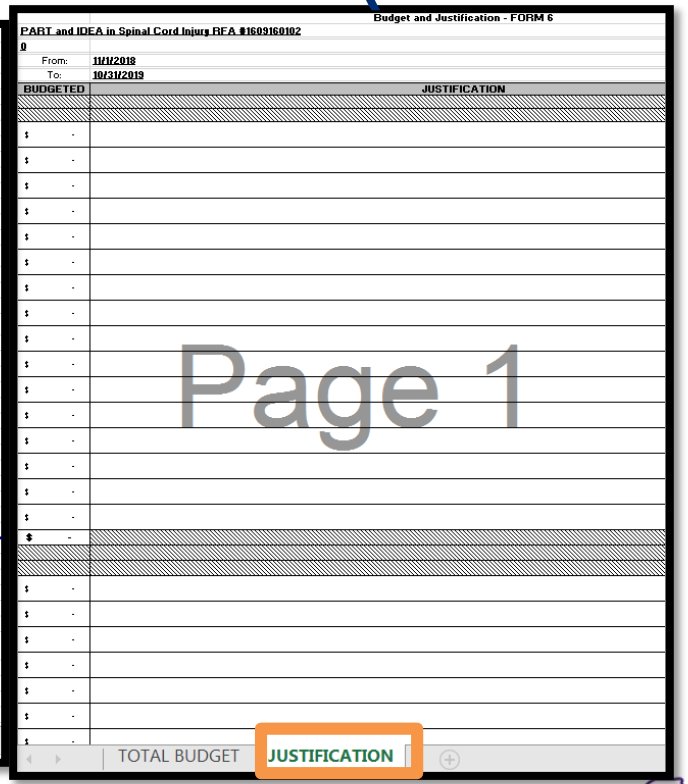
FORM 6 - EXPENDITURE BASED BUDGET
PERSONAL SERVICES DETAIL

	SALARY				
POSITION TITLE	ANNUALIZED SALARY PER POSITION	STANDARD WORK WEEK HOURS	PERCENT OF EFFORT FUNDED	NUMBER OF MONTHS FUNDED	TOTAL
1.					$ -
2.					$ -
3.					$ -
4.					$ -

TOTAL BUDGET | JUSTIFICATION

Page 1

Tab 1, Total Budget



Budget and Justification - FORM 6

PART and IDEA in Spinal Cord Injury RFA #1609160102

0

From: 11/1/2018

To: 10/31/2019

BUDGETED	JUSTIFICATION
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
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$ -	
$ -	
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$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	
$ -	

TOTAL BUDGET | JUSTIFICATION

Page 1

Tab 2, Justification

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

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

FORM 6-S - EXPENDITURE BASED BUDGET

YEAR ONE SUMMARY (SUBCONTRACT #1)

PROJECT NAME: PART and IDEA in Spinal Cord Injury Research RFA #1609160102

SUBCONTRACTOR #1 NAME: Sub-Applicant Budget

YEAR ONE 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	$ -
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	$ -
	$ -	0	0	0	$ -

Page 1

SUBCONTRACT #1 TOTAL BUDGET | SUBCONTRACT #1 JUSTIFICATION | SUBCONTRACT #2 TOTAL BUDGET | SUBCONTRA

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

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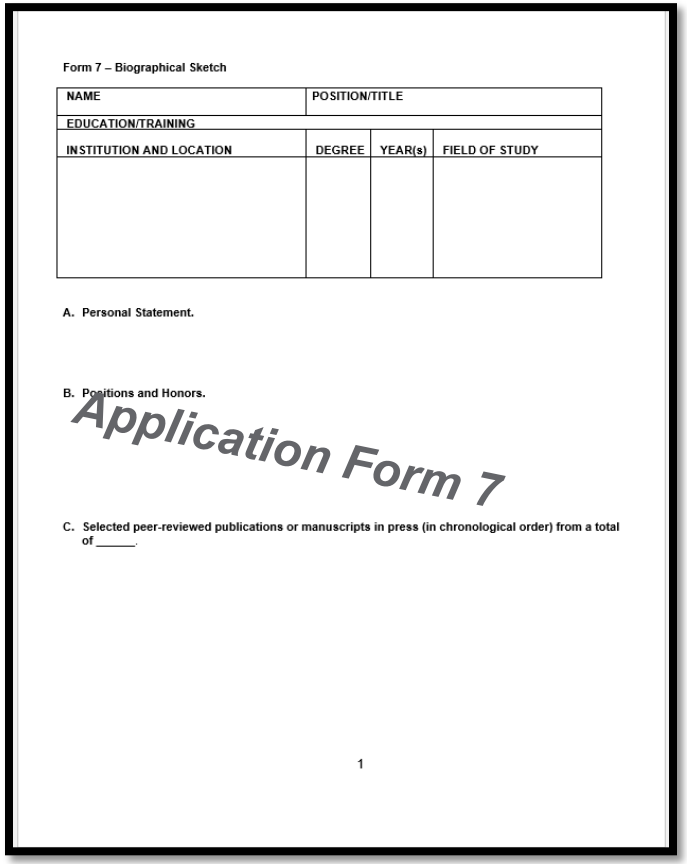
Attachment 7: Application Forms 7-11

7. Biographical Sketch
8. Facilities and Resources
9. Workplan Narrative
10. Human Subjects
11. Vertebrate Animals

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

Upload in the Program Specific Questions Section of the Grants Gateway

Attachment 7: Application Forms 7-11



Form 7 – Biographical Sketch

NAME	POSITION/TITLE		
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY

A. Personal Statement.

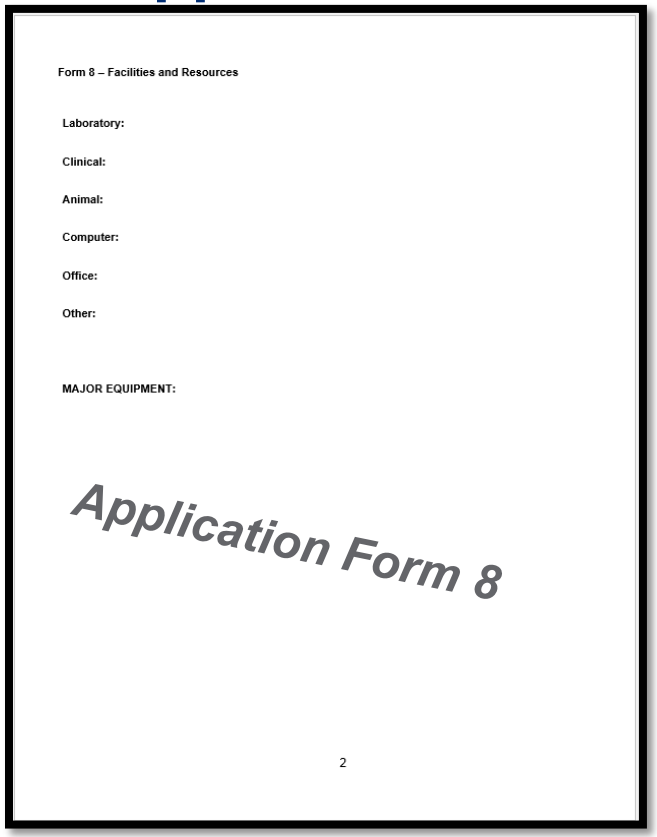
B. Positions and Honors.

Application Form 7

C. Selected peer-reviewed publications or manuscripts in press (in chronological order) from a total of _____.

1

Attachment 7: Application Forms 7-11



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Attachment 7: Application Forms 7-11

A. Specific Aims

B. Significance

C. Background and Preliminary Results

D. Research Design and Methods

E. Literature Citations

PAGE LIMITS Sections A-D:

- ***20 page limit for PART***
- ***10 page limit for IDEA***

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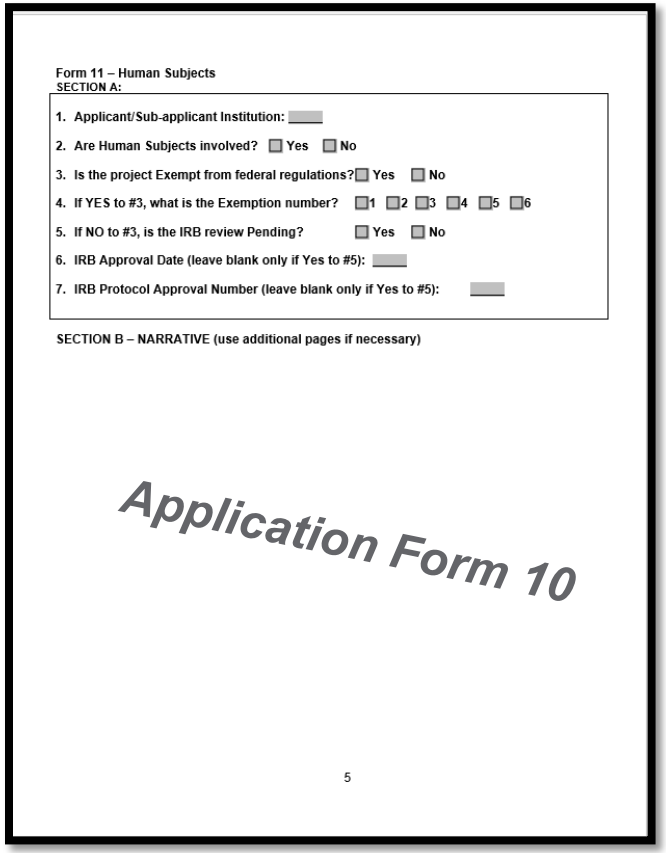
Attachment 7: Application Forms 7-11



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 10

5

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

Upload in the Program Specific Questions Section of the Grants Gateway

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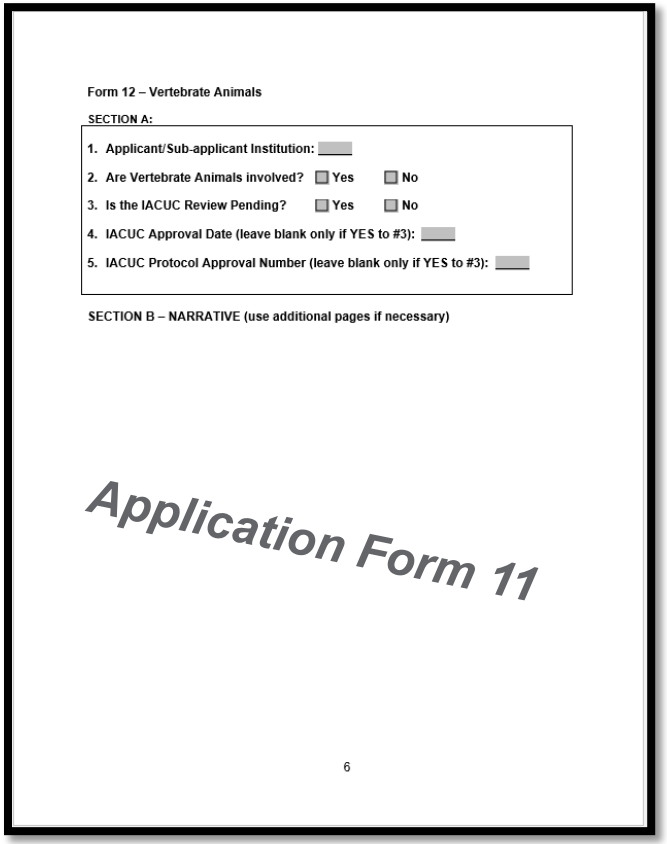
Attachment 7: Application Forms 7-11



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 11

6

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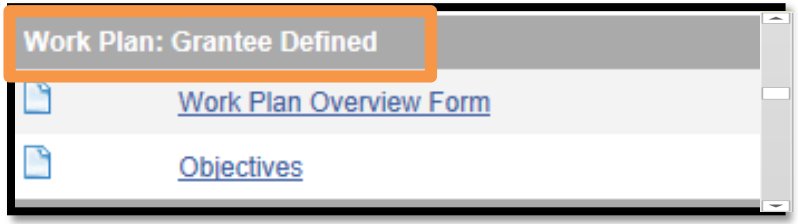
Online Workplan

Forms Menu → Scroll down to Work Plan: Grantee Defined



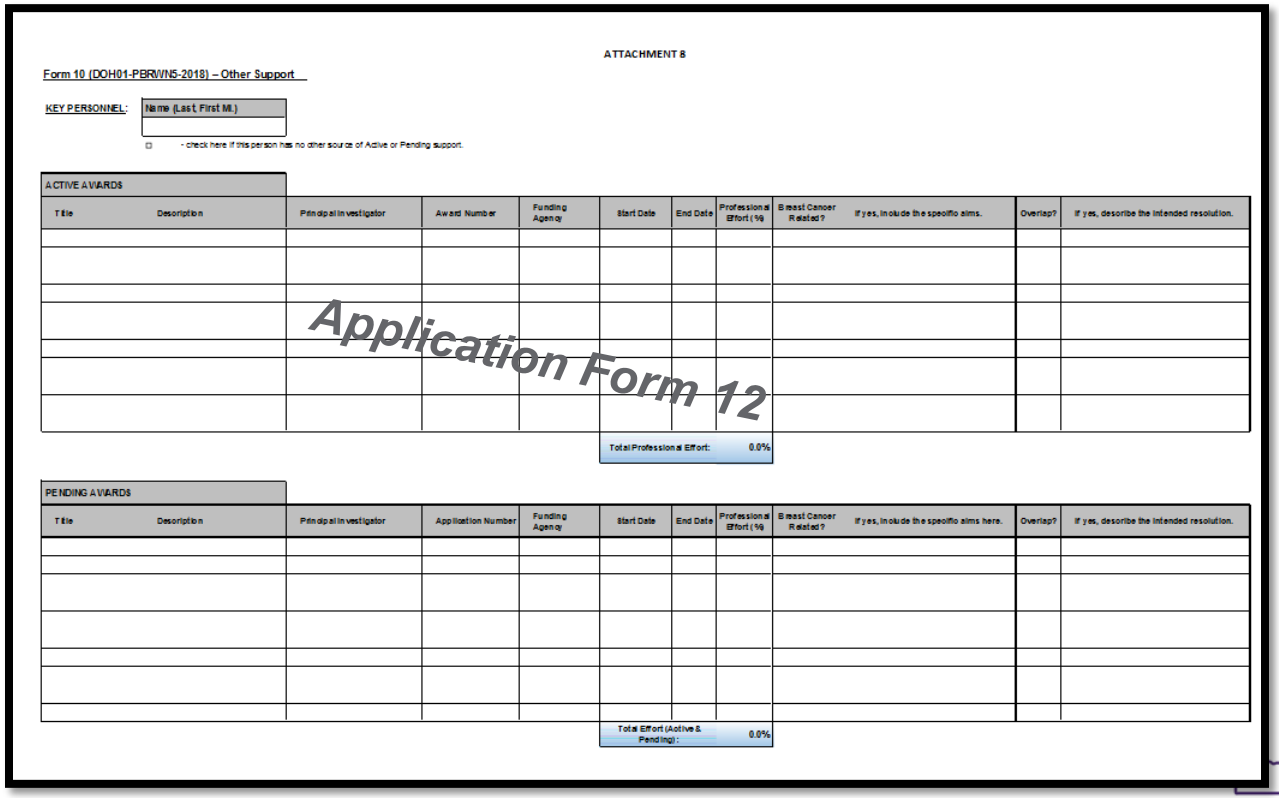
- Complete the Work Plan Overview Form and
- Objectives

Project Narrative/Workplan Outcomes

- The application may not include an scientific, budgetary or commitment overlap with other awards that will be active beyond the anticipated start date of the award

- Funded projects shall not include program implementation which goes beyond the contract period

Attachment 8: Application Form 12



ATTACHMENT 8

Form 10 (DOH01-PBRWN5-2018) – Other Support

KEY PERSONNEL: Name (Last, First MI.)

☐ - 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 (%)	Breast 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 (%)	Breast Cancer Related? If yes, include the specific aims here.	Overlap?	If yes, describe the intended resolution.

Total Effort (Active & Pending): 0.0%

Application Form 12

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

Upload in the Program Specific Questions Section of the Grants Gateway

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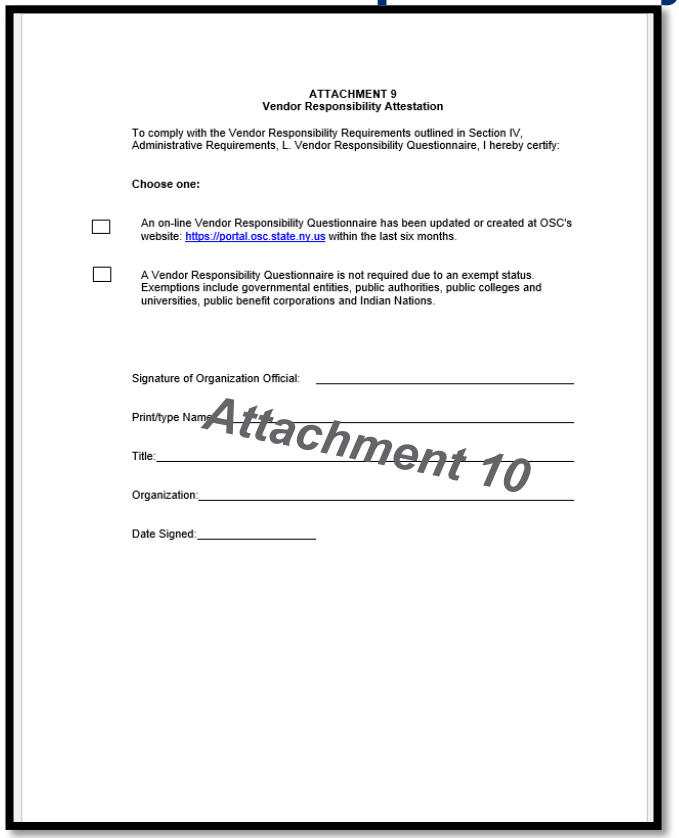
See RFA pg. 11

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: _____

Attachment 10

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

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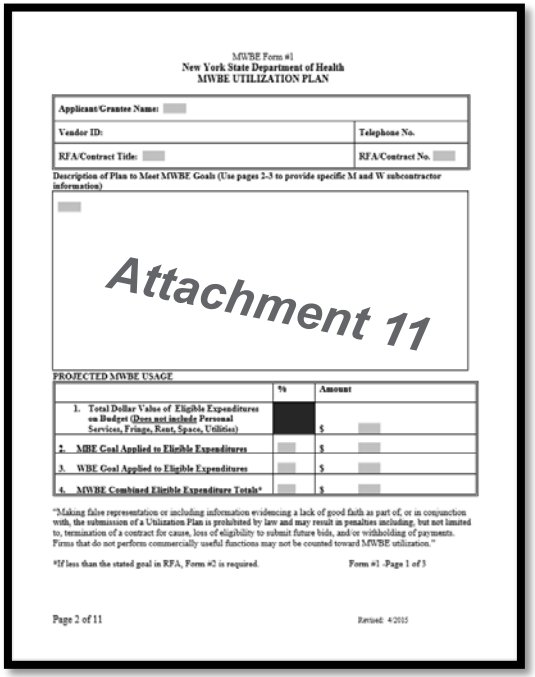
Attachment 11: Minority & Women-Owned Business Enterprise Requirement Forms

See RFA pg. 9-10

- 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:	
Vendor ID:	Telephone No.
RFA/Contract Title:	RFA/Contract No.

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)		$
2. MBE Goal Applied to Eligible Expenditures		$
3. WBE Goal Applied to Eligible Expenditures		$
4. MWBE Combined Eligible Expenditure Totals*		$

"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

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Review and Award Process

Review and Award Process

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

American Institute of Biological Sciences

Spinal Cord Injury Research Board

NEW YORK STATE DEPARTMENT OF HEALTH

NEW YORK STATE | Department of Health | Wadsworth Center

Review Criteria

PART

1. Research Plan **60%**
2. Translational Clinical Potential **20%**
3. Budget **20%**

IDEA

1. Research Plan **60%**
2. Impact **20%**
3. Budget **20%**

American Institute of Biological Sciences

Spinal Cord Injury Research Board

New York State Department of Health

New York State Department of Health | Wadsworth Center

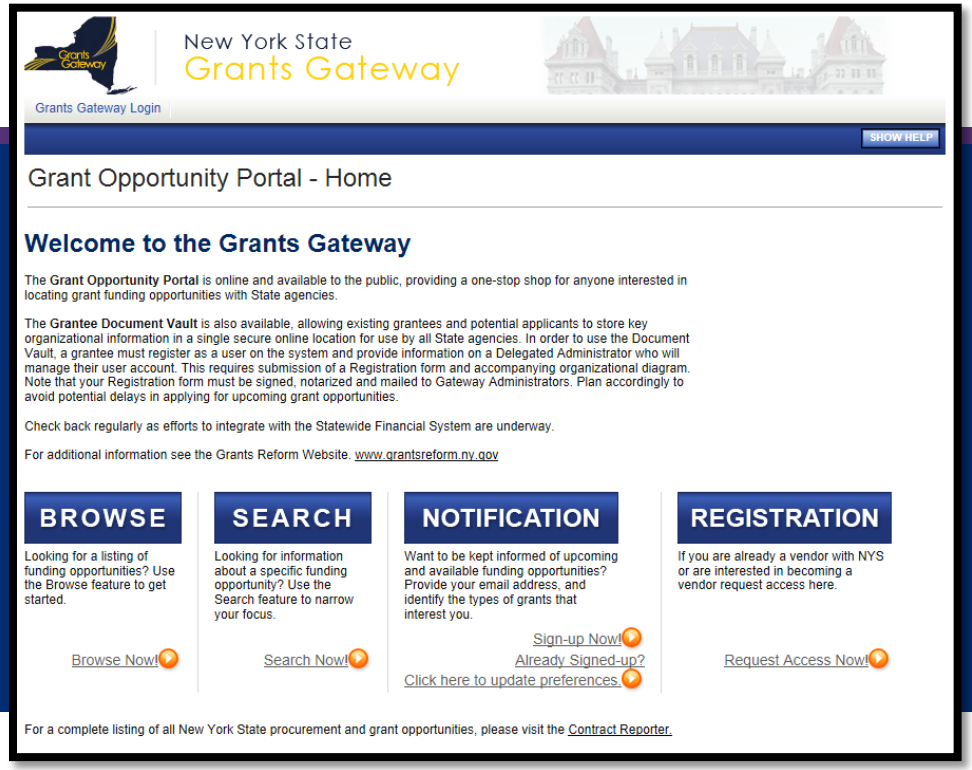
Debriefing

- 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.

Grants Gateway Overview

https://grantsgateway.ny.gov/



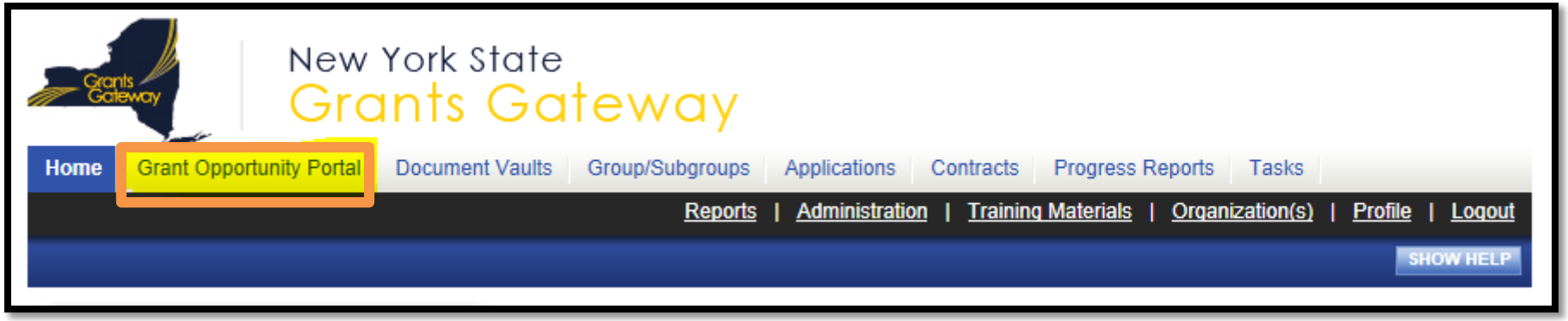
Grants Gateway FAQ

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?

See RFA pgs. 13-14

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 (Healthcare Practitioner), 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

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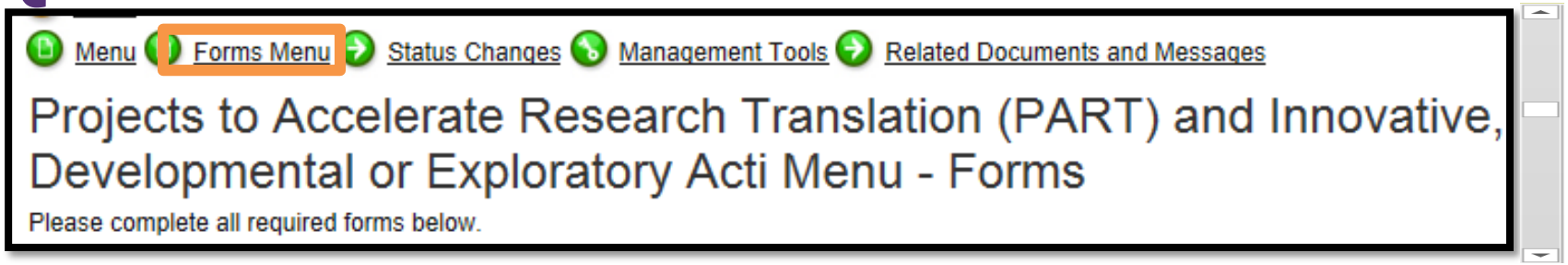
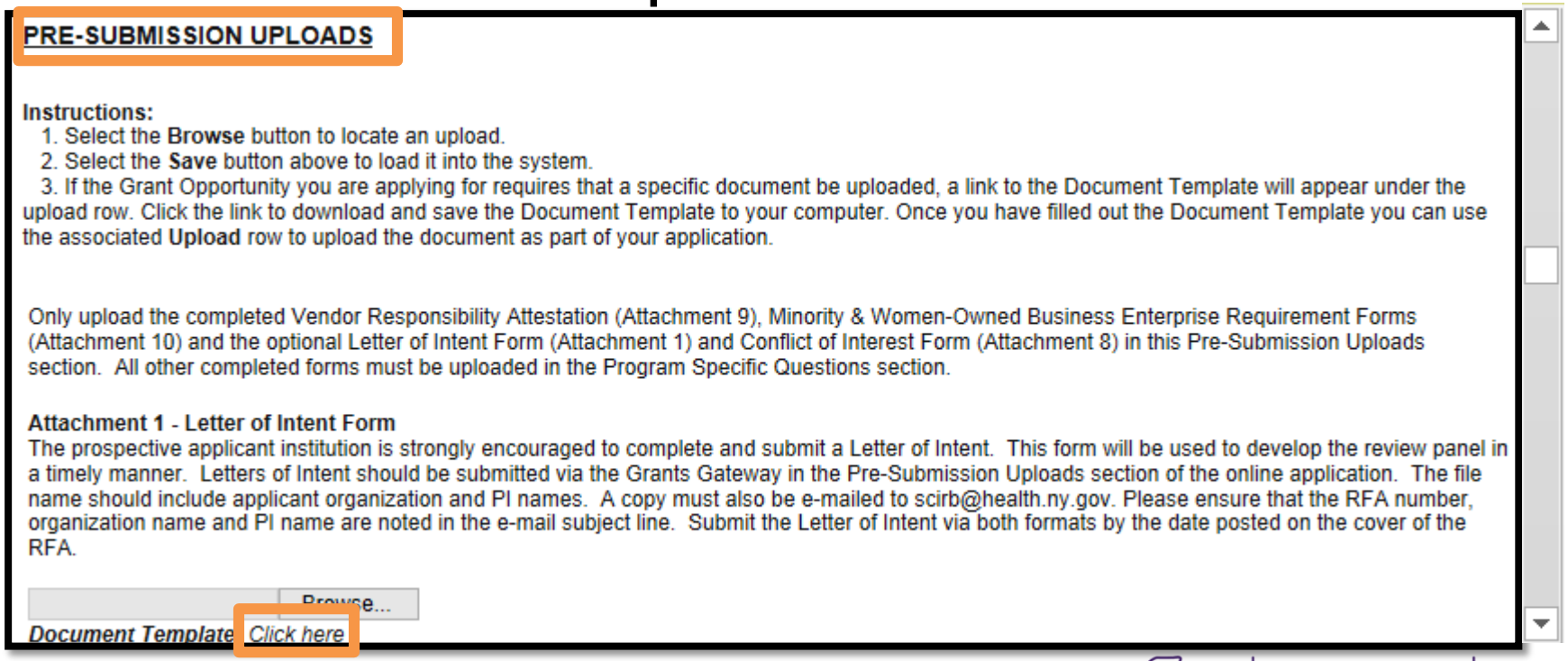
Q2: Where do I download the RFA Attachments?



- 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

https://grantsgateway.ny.gov

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

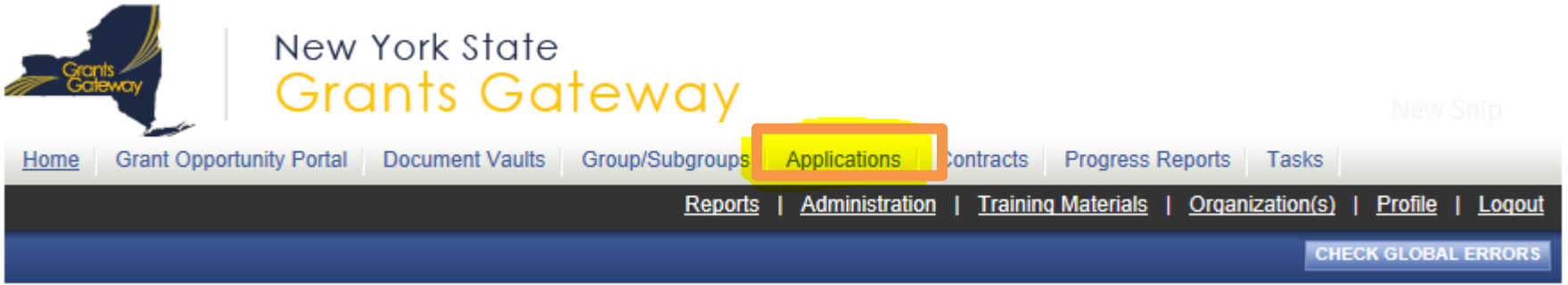
The prospective applicant institution is strongly encouraged to complete and submit a Letter of Intent. This form will be used to develop the review panel in a timely manner. Letters of Intent should be submitted via the Grants Gateway in the Pre-Submission Uploads section of the online application. 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*

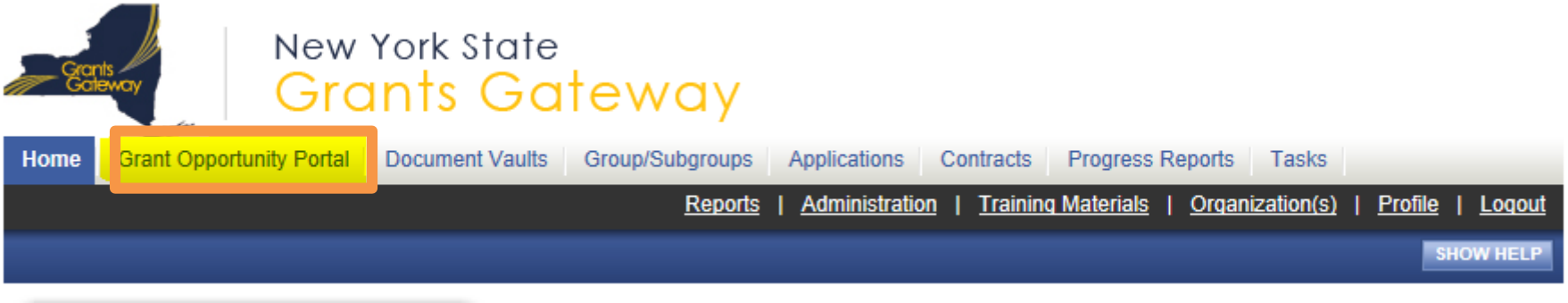
NEW YORK STATE | Department of Health | Wadsworth Center

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 (Healthcare Practitioner), 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

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Your Questions

NEW YORK STATE OF OPPORTUNITY. | Department of Health | Wadsworth Center

Thank you!!

March 6, 2018