



A Walk Through the SF424 (R&R)

**NIH Office of Extramural Research
October 2008**



What is the SF424 (R&R)?

- Stands for Standard Form 424 – Research and Related.
- Is actually a combination of separate forms focusing on the many aspects of a proposed grant.
- Is used government-wide to apply for all Research and Research-related grants.
 - Used by 15 different Federal agencies
 - Based on needs of all agencies, and not tailored to specific agencies, funding opportunities, or grant programs
 - Allows use of agency-specific forms and special instructions where appropriate



Features of the SF424 (R&R)

- A complete application to NIH will include a combination of (R&R) components & PHS 398 components.
- The applicant **must** complete the application using the package attached to that particular Funding Opportunity Announcement (*Information is drawn from the specific FOA and auto-completed for use in the forms*).
- Applicants should *not* use any forms or sample forms from other announcements.
- Allows applicants to complete data entry in all necessary components and upload appropriate attachments.



Features of the SF424 (R&R) (cont.)

- SF424 (R&R) Components used for NIH grant applications include:
 - SF424 (R&R)—*An application cover component*
 - Project/Performance Site Location(s)
 - Research & Related Other Project Information
 - Research & Related Senior/Key Person - Expanded
 - Research & Related Budget
 - Research & Related Personal Data (*NIH does not use*)
 - R&R Subaward Budget Attachment Form
 - SBIR/STTR Information



Features of the SF424 (R&R) (cont.)

- NIH requires additional data collection to accommodate the unique information required for review of its biomedical research portfolio. Therefore, these agency-specific components (titled PHS 398) were also developed:
 - PHS 398 Cover Letter File
 - PHS 398 Cover Page Supplement (*supplements the R&R Cover*)
 - PHS 398 Modular Budget
 - PHS 398 Research Plan
 - PHS 398 Checklist
 - New PHS forms for Fellowship (F), Career Award (K) and Training (T)




Features of the SF424 (R&R): Application Guide

- NIH has developed two, specific SF424 (R&R) Application Guides: 1) General Instructions; 2) General + SBIR/STTR
- Includes instructions that are imbedded in the actual forms as well as agency-specific instructions
- Agency-specific instructions denoted with the HHS Logo
- Application Guides are split into three parts:
 - Part I: Instructions for Preparing and Submitting an Application
 - Part II: Supplemental Instructions for Preparing the Human Subjects Section of the Research Plan
 - Part III: Policies, Assurances, Definitions





Accessing Application Forms

- ***Find*** a grant opportunity in Grants.gov or the NIH Guide for Grants and Contracts.
- Click on “Apply for Grant Electronically” button in the Funding Opportunity Announcement (FOA). A rectangular button with a light beige background and a thin black border. The text 'Apply for Grant Electronically' is written in a black, sans-serif font.
- FOA will link to Grants.gov where applications and instructions are available for download.
- In Grants.gov, use the FOA number for searching and confirming you are responding to the correct announcement.



Grant Application Package

Opportunity Title:	ADOBE R01 System-to-System Program Announcement
Offering Agency:	National Institutes of Health Stage
CFDA Number:	93.389
CFDA Description:	Research Infrastructure
Opportunity Number:	PA-S2-R01
Competition ID:	
Opportunity Open Date:	04/01/2007
Opportunity Close Date:	02/28/2010
Agency Contact:	NIHStage Developer For NIH Stage Development E-mail: schraden@od.nih.gov Phone: 123-456-7890

Header Information
Pre-filled from announcement

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name: [Yellow box]

Mandatory Documents

- SP424 (R and R)
- PHS 398 Research Plan
- PHS 398 Cover Page Supplement
- PHS 398 Checklist
- Research And Related Other Project Information
- Research And Related Senior/Key Person Profile
- Research And Related Project/Performance Site L

Move Form to Complete



Move Form to Delete



Mandatory Documents for Submission

[Empty box for Mandatory Documents for Submission]

Open Form

Optional Documents

- Research And Related Budget
- R and R Subaward Budget Attachment(s) Form
- PHS 398 Modular Budget
- PHS 398 Cover Letter File

Move Form to Submission List



Move Form to

Optional Documents for Submission

[Empty box for Optional Documents for Submission]



Navigating Application Forms

- The **Grant Application Package Screen** provides access to all appropriate forms, both components that are required (mandatory) and those that are optional.
 - Some forms that are listed as optional for Grants.gov are actually required by NIH. For example, both modular budget forms and R&R budget forms are listed as optional, though you must submit at least one (but never both).
- Click on form and move it to submission box, then open to fill in application information.
- **Adobe Only** – Grants.gov mandatory fields are outlined in red and shaded in yellow.
 - Not all fields required by NIH are marked mandatory on the forms.

Close Form

Next

Print Page

About

APPLICATION FOR FEDERAL ASSISTANCE
SF 424 (R&R)

1. * TYPE OF SUBMISSION

☐ Pre-application ☐ Application
☐ Changed/Corrected Application

2. DATE SUBMITTED

Applicant Identifier

3. DATE RECEIVED BY STATE

State Application Identifier

4. * Federal Identifier

5. APPLICANT INFORMATION

* Organizational DUNS:

* Legal Name:

Department:

Division:

* Street1:

Street2:

* City:

County:

* State:

Province:

* Country:

USA

* ZIP / Postal Code:

Person to be contacted on matters involving this application

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

* Phone Number:

Fax Number:

Email:

6. * EMPLOYER IDENTIFICATION (EIN) or (TIN):

7. * TYPE OF APPLICANT:

Please select one of the following

Other (Specify):

Small Business Organization Type

☐ Women Owned

☐ Socially and Economically Disadvantaged

8. * TYPE OF APPLICATION:

☐ New

☐ Resubmission

☐ Renewal

☐ Continuation

☐ Revision

If Revision, mark appropriate box(es).

☐ A. Increase Award ☐ B. Decrease Award ☐ C. Increase Duration

☐ D. Decrease Duration ☐ E. Other (specify):

* Is this application being submitted to other agencies? ☒ Yes ☐ No

What other Agencies?

9. * NAME OF FEDERAL AGENCY:

National Institutes of Health

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

93.389

TITLE:

Research Infrastructure

11. * DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

12. * AREAS AFFECTED BY PROJECT (cities, counties, states, etc.)

13. PROPOSED PROJECT:

* Start Date

* Ending Date

14. CONGRESSIONAL DISTRICTS OF:

a. * Applicant

b. * Project

15. PROJECT DIRECTOR/PRINCIPAL INVESTIGATOR CONTACT INFORMATION

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

Position/Title:

* Organization Name:

Department:

Division:

* Street1:

Street2:

* City:

County:

* State:

Province:

* Country:

USA

* ZIP / Postal Code:

* Phone Number:

Fax Number:

* Email:

SF424 (R&R)

Cover Component

Page 1



Notes on SF424 (R&R) Cover Component – Page 1

- Always start with the Cover Component. Information entered here pre-populates other components.
- General information about the applicant organization, contact information for the PD/PI and Authorized Organizational Representative.
- **Item 1, Type of Submission**
 - Pre-application—instructed not to use unless specifically noted in FOA (used by X02 grant mechanism).
 - Changed/Corrected Application— Only use when correcting an application that failed system validations. This is NOT a resubmission.
- **Item 5, Organizational DUNS** must match DUNS in eRA Commons profile and Grants.gov registration.
- **Item 6**, Include **email** of person to be contacted; NIH sends notifications to this address in addition to email addresses provided for PD/PI and AOR.



SF424 (R&R)—A Cover Component: A Few Data Issues

- **Item 8, Type of Application-**
 - **New** is an application submitted for the first time
 - **Resubmission** is a revised or amended application
 - **Renewal** is equivalent to a Competing Continuation
 - **Continuation** is equivalent to a Progress Report. For the purposes of NIH and other PHS agencies, the box for Continuation will **not** be used and should **not** be checked.
 - **Revision** is somewhat equivalent to a Competing Supplement
- **Item 14, Congressional District** will be moving to the Project/Performance Site Locations form in near future.



SF424 (R&R) Cover Component - Page 2

16. ESTIMATED PROJECT FUNDING		17. * IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. * Total Estimated Project Funding	<input type="text"/>	a. YES	<input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:
b. * Total Federal & Non-Federal Funds	<input type="text"/>		DATE: <input type="text"/>
c. * Estimated Program Income	<input type="text"/>	b. NO	<input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372; OR
			<input type="checkbox"/> PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
18. By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances * and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)			
<input type="checkbox"/> * I agree			
<small>* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.</small>			
19. Authorized Representative			
Prefix	* First Name:	Middle Name:	* Last Name:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Suffix: <input type="text"/>
* Position/Title:	<input type="text"/>	* Organization:	<input type="text"/>
Department:	<input type="text"/>	Division:	<input type="text"/>
* Street1:	<input type="text"/>	Street2:	<input type="text"/>
* City:	<input type="text"/>	County:	<input type="text"/>
Province:	<input type="text"/>	* State:	<input type="text"/>
* Phone Number:	<input type="text"/>	* ZIP / Postal Code:	<input type="text"/>
* Country:	<input type="text"/>	* Email:	<input type="text"/>
* Signature of Authorized Representative	* Date Signed		
<input type="text"/>	<input type="text"/>		
Completed on submission to Grants.gov			
20. Pre-application <input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>			
21. Attach an additional list of Project Congressional Districts if needed.			
<input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>			



Project/Performance Site Locations

RESEARCH & RELATED Project/Performance Site Location(s)

Project/Performance Site Primary Location

Organization Name:

* Street1:

Street2:

* City: County:

* State: Province:

* Country: * ZIP / Postal Code:

Project/Performance Site Location 1

Organization Name:

* Street1:

Street2:

* City: County:

* State: Province:

* Country: * ZIP / Postal Code:

Additional Location(s)

- Collects data for up to eight locations
 - More than 8 locations requires a text attachment
 - Format for the attachment available at <http://grants.nih.gov/grants/funding/424/index.htm>

RESEARCH & RELATED Other Project Information

Other Project Information

1. * Are Human Subjects Involved? ☐ Yes ☐ No

1.a. If YES to Human Subjects

Is the IRB review Pending? ☐ Yes ☐ No

IRB Approval Date:

Exemption Number: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

Human Subject Assurance Number:

2. * Are Vertebrate Animals Used? ☐ Yes ☐ No

2.a. If YES to Vertebrate Animals

Is the IACUC review Pending? ☐ Yes ☐ No

IACUC Approval Date:

Animal Welfare Assurance Number

3. * Is proprietary/privileged information included in the application? ☐ Yes ☐ No

4.a. * Does this project have an actual or potential impact on the environment? ☐ Yes ☐ No

4.b. If yes, please explain:

4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? ☐ Yes ☐ No

4.d. If yes, please explain:

5.a. * Does this project involve activities outside the U.S. or partnership with International Collaborators? ☐ Yes ☐ No

5.b. If yes, identify countries:

5.c. Optional Explanation:

6. * Project Summary/Abstract

7. * Project Narrative

8. Bibliography & References Cited

9. Facilities & Other Resources

10. Equipment

11. Other Attachments ☐



Other Project Information

- **Items 1 and 2, Human Subject Involvement and Vertebrate Animal Use** – Approval dates still provided as just-in-time information.
 - Check Yes to “Is the IRB Review Pending” and “Is the IACUC Review Pending” even if process has not begun at time of submission.
- **Item 7, Project Narrative** – Use for the public health relevance section.
- **Item 11, Other Attachments** – Only complete this item when requested in the FOA.

PROFILE - Project Director/Principal Investigator

Prefix	* First Name	Middle Name	* Last Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position/Title: <input type="text"/>		Department: <input type="text"/>		
Organization Name: <input type="text"/>		Division: <input type="text"/>		
* Street1: <input type="text"/>		Street2: <input type="text"/>		
* City: <input type="text"/>	County: <input type="text"/>	* State: <input type="text"/>	Province: <input type="text"/>	
* Country: <input type="text"/>	* Zip / Postal Code: <input type="text"/>			
* Phone Number		Fax Number	* E-Mail	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Credential, e.g., agency login: <input type="text"/>				
* Project Role: <input type="text"/>		Other Project Role Category: <input type="text"/>		
* Attach Biographical Sketch		<input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>		
Attach Current & Pending Support		<input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>		

Senior/Key Person Profile - Expanded

PROFILE - Senior/Key Person 1				
Prefix	* First Name	Middle Name	* Last Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position/Title: <input type="text"/>		Department: <input type="text"/>		
Organization Name: <input type="text"/>		Division: <input type="text"/>		
* Street1: <input type="text"/>		Street2: <input type="text"/>		
* City: <input type="text"/>	County: <input type="text"/>	* State: <input type="text"/>	Province: <input type="text"/>	
* Country: <input type="text"/>	* Zip / Postal Code: <input type="text"/>			
* Phone Number		Fax Number	* E-Mail	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Credential, e.g., agency login: <input type="text"/>				
* Project Role: <input type="text"/>		Other Project Role Category: <input type="text"/>		
* Attach Biographical Sketch		<input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>		
Attach Current & Pending Support		<input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>		
<input type="button" value="Next Person"/>				



Senior/Key Person Profile

- Captures personal profile information on PD/PI, key personnel, and other significant contributors.
- eRA Commons “Credential” mandatory for all PD/PIs
- Organization Name is also required by NIH.
- Attach a Biographical sketch for each person. Format and samples are available from the SF424 (R&R) Forms Page.
- Do not attach “Current & Pending Support” unless requested in FOA. This will be requested later during the just-in-time process.
- Form captures PD/PI plus 39 others.
- Form can also be used for “Other Significant Contributors”.
- Two new designations – Post-Doc Scholar and Co-Investigator – will be added soon to ‘Project Role.’
- The degree information will be pulled off the PHS 398 Cover Page Supplement in the near future.



Research and Related Budget - General Notes

- R&R Budget Form is one of two “optional” forms for submitting budget information.
 - Modular budgets do not use these forms, but instead use a PHS 398 form.
 - See FOA and SF424 (R&R) Instruction Guide for information on when to use each type of budget form.
- Applicant prepares a detailed budget for *every* budget period.
- A detailed Cumulative budget will be system-generated based on the budget period data.



R&R Budget Sections A & B

Personnel separated into 2 sections:

- A. Senior/Key Person
 - Allows 8 as separate named individuals
 - Provide info on additional Senior/Key persons in a text attachment
 - Provide time in “person-months” units, not percent effort
 - PD/PI field must be filled-in
- B. Other Personnel
 - Postdocs, Grad Students, Undergrads: Only the number of personnel is required (not specific names or responsibilities)
 - Provide more detail in Budget Justification
 - “Base Salary” can be left blank when applying but NIH will require the information before the grant is awarded

ORGANIZATIONAL DUNS:

* Budget Type: ☐ Project ☐ Subaward/Consortium

Enter name of Organization:

* Start Date: * End Date: Budget Period 1

R&R Budget Sections C - E

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item

* Funds Requested (\$)

1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>
11.	Total funds requested for all equipment listed in the attached file	
	<input type="text"/>	
	Total Equipment	<input type="text"/>

Additional Equipment:

D. Travel

Funds Requested (\$)

1.	Domestic Travel Costs (Incl. Canada, Mexico and U.S. Possessions)	<input type="text"/>
2.	Foreign Travel Costs	<input type="text"/>
	Total Travel Cost	<input type="text"/>

E. Participant/Trainee Support Costs

Funds Requested (\$)

1.	Tuition/Fees/Health Insurance	<input type="text"/>
2.	Stipends	<input type="text"/>
3.	Travel	<input type="text"/>
4.	Subsistence	<input type="text"/>
5.	Other <input type="text"/>	<input type="text"/>

<input type="text"/>	Number of Participants/Trainees	Total Participant/Trainee Support Costs	<input type="text"/>
----------------------	---------------------------------	---	----------------------



R&R Budget Sections C - E

- **Item C, Equipment** allows itemization of up to 10 pieces of equipment. If more, include total dollars in line 11 and provide details in the attachment.
- **Item D, Travel** separates Domestic and Foreign travel, but NIH continues to award as a single category.
- **Item E, Participant/Trainee Support Costs** not used unless requested in FOA.

* ORGANIZATIONAL DUNS: * Budget Type: ☐ Project ☐ Subaward/ConsortiumEnter name of Organization:

Delete Entry

Start Date: * End Date: Budget Period 1

F. Other Direct Costs

Funds Requested (\$)

1. Materials and Supplies 2. Publication Costs 3. Consultant Services 4. ~~ADP/Computer Services~~ 5. Subawards/Consortium/Contractual Costs 6. Equipment or Facility Rental/User Fees 7. Alterations and Renovations 8. 9. 10.

Total Other Direct Costs

G. Direct Costs

Funds Requested (\$)

Total Direct Costs (A thru F)

H. Indirect Costs

Indirect Cost Type

Indirect Cost
Rate (%)Indirect Cost
Base (\$)

* Funds Requested (\$)

1. 2. 3. 4.

Total Indirect Costs

Cognizant Federal Agency

(Agency Name, POC Name, and POC Phone Number)

I. Total Direct and Indirect Costs

Funds Requested (\$)

Total Direct and Indirect Institutional Costs (G + H)

J. Fee

Funds Requested (\$)

K. * Budget Justification

(Only attach one file.)

Add Attachment

Delete Attachment

View Attachment

R&R Budget Sections F - K

- Include tuition remission in **Item F, Other Direct Costs.**
- **Item F(5), Consortium Costs** is not auto-populated.
- **Next Period Button** at top of page not available until all required data fields in this component are completed, including the budget justification.

R&R SUBAWARD BUDGET ATTACHMENT(S) FORM

Instructions: On this form, you will attach the R&R Subaward Budget files for your grant application. Complete the subawardee budget(s) in accordance with the R&R budget instructions. Please remember that any files you attach must be a PDF document.

[Click here to extract the R&R Subaward Budget Attachment](#)

Important: Please attach your subawardee budget file(s) with the file name of the subawardee organization. Each file name must be unique.

1) Please attach Attachment 1	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
2) Please attach Attachment 2	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
3) Please attach Attachment 3	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
4) Please attach Attachment 4	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
5) Please attach Attachment 5	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
6) Please attach Attachment 6	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
7) Please attach Attachment 7	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
8) Please attach Attachment 8	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
9) Please attach Attachment 9	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
10) Please attach Attachment 10	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment



R&R Subaward Budget Attachment Form

- Used for detailed budget from all consortium grantees.
- Applicant sends the R&R budget component to the consortium grantee for completion; it is returned to the applicant; applicant attaches it in this component.
- Consortium grantee(s) must have a version of Adobe Reader that is compatible with Grants.gov's forms.
- Allows up to 10 separate budget attachments.
 - Provide one budget for each consortium grantee
 - If more than 10 consortium partners, include details for 11 and above as PDF documents in budget justification.

SBIR/STTR Information

OMB Number: 0925-0001

Expiration Date: 09/30/2007

* Program Type (select only one)

- ☐ SBIR ☐ STTR
- ☐ Both (See agency-specific instructions to determine whether a particular agency allows a single submission for both SBIR and STTR)

* SBIR/STTR Type (select only one)

- ☐ Phase I ☐ Phase II
- ☐ Fast-Track (See agency-specific instructions to determine whether a particular agency participates in Fast-Track)

Questions 1-7 must be completed by all SBIR and STTR Applicants:

<input type="checkbox"/> Yes <input type="checkbox"/> No	* 1. Do you certify that at the time of award your organization will meet the eligibility criteria for a small business as defined in the funding opportunity announcement?
<input type="checkbox"/> Yes <input type="checkbox"/> No	* 2. Does this application include subcontracts with Federal laboratories or any other Federal Government agencies? * If yes, insert the names of the Federal laboratories/agencies: <div></div>
<input type="checkbox"/> Yes <input type="checkbox"/> No	* 3. Are you located in a HUBZone? To find out if your business is in a HUBZone, use the mapping utility provided by the Small Business Administration at its web site: http://www.sba.gov
<input type="checkbox"/> Yes <input type="checkbox"/> No	* 4. Will all research and development on the project be performed in its entirety in the United States? If no, provide an explanation in an attached file. * Explanation: <div></div> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<input type="checkbox"/> Yes <input type="checkbox"/> No	* 5. Has the applicant and/or Program Director/Principal Investigator submitted proposals for essentially equivalent work under other Federal program solicitations or received other Federal awards for essentially equivalent work? * If yes, insert the names of the other Federal agencies: <div></div>
<input type="checkbox"/> Yes <input type="checkbox"/> No	* 6. Disclosure Permission Statement: If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?
	* 7. Commercialization Plan: If you are submitting a Phase II or Phase I/Phase II Fast-Track Application, include a Commercialization Plan in accordance with the agency announcement and/or agency-specific instructions. * Attach File: <div></div> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>

SBIR/STTR Information

Page 1



SBIR/STTR Information

(Pages 1 and 2)

- **Item 1, Eligibility** – Applicants must meet SBIR/STTR eligibility requirements at time of award, not time of application.
- **Item 6, Disclosure Permission Statement** – Allows NIH to share contact information and project title to outside partners for possible collaborations or investments.
- **Item 7, Commercialization Plan** – Include as a PDF attachment.



SBIR/STTR Information

(Page 2)

SBIR/STTR Information		OMB Number: 0925-0001
		Expiration Date: 09/30/2007
SBIR-Specific Questions:		
<i>Questions 8 and 9 apply only to SBIR applications. If you are submitting <u>ONLY</u> an STTR application, leave questions 8 and 9 blank and proceed to question 10.</i>		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 8. Have you received SBIR Phase II awards from the Federal Government? If yes, provide a company commercialization history in accordance with agency-specific instructions using this attachment.</p> <p>* Attach File: <input type="text"/> Add Attachment Delete Attachment View Attachment</p>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 9. Will the Project Director/Principal Investigator have his/her primary employment with the small business at the time of award?</p>	
STTR-Specific Questions:		
<i>Questions 10 and 11 apply only to STTR applications. If you are submitting <u>ONLY</u> an SBIR application, leave questions 10 and 11 blank.</i>		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 10. Please indicate whether the answer to BOTH of the following questions is TRUE:</p> <p>(1) Does the Project Director/Principal Investigator have a formal appointment or commitment either with the small business directly (as an employee or a contractor) OR as an employee of the Research Institution, which in turn has made a commitment to the small business through the STTR application process; AND</p> <p>(2) Has the Project Director/Principal Investigator devoted at least 10% effort to the proposed project?</p>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 11. In the joint research and development proposed in this project, does the small business perform at least 40% of the work and the research institution named in the application perform at least 30% of the work?</p>	



Agency-specific Components (*a.k.a. PHS 398 Components*)

- Form pages used in addition to standard SF424, and included in the NIH form set:
 - PHS 398 Cover Letter File
 - PHS 398 Cover Page Supplement (*supplements the R&R Cover*)
 - PHS 398 Modular Budget
 - PHS 398 Research Plan
 - PHS 398 Checklist
 - New PHS forms for Fellowship (F), Career Award (K) and Training (T)
- Allows NIH to collect information not provided by other research agencies.



PHS 398 Cover Letter

Close Form

Print Page

About

PHS 398 Cover Letter

OMB Number: 0925-0001

Expiration Date: 9/30/2007

*Mandatory Cover Letter Filename:

Add Cover Letter File

Delete Cover Letter File

View Cover Letter File

- A suggested format for cover letters is described in SF424 (R&R) Application Guides.

1. Project Director / Principal Investigator (PD/PI)	
Prefix:	<input type="text"/>
* First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
* Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
* New Investigator? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Degrees:	<input type="text"/> <input type="text"/> <input type="text"/>
2. Human Subjects	
Clinical Trial?	<input type="checkbox"/> No <input type="checkbox"/> Yes
* Agency-Defined Phase III Clinical Trial?	<input type="checkbox"/> No <input type="checkbox"/> Yes
3. Applicant Organization Contact	
Person to be contacted on matters involving this application	
Prefix:	<input type="text"/>
* First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
* Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
* Phone Number:	<input type="text"/>
Fax Number:	<input type="text"/>
Email:	<input type="text"/>
* Title: <input type="text"/>	
* Street1:	<input type="text"/>
Street2:	<input type="text"/>
* City:	<input type="text"/>
County:	<input type="text"/>
* State:	<input type="text"/>
Province:	<input type="text"/>
* Country:	<input type="text"/>
USA: UNITED STATES	
* Zip / Postal Code:	<input type="text"/>

PHS 398

Cover Page
Supplement

Page 1

PHS 398
Cover Page
Supplement
Page 2

☐ No ☐ Yes

Cell Line(s): ☐ Specific stem cell line cannot be referenced at this time. One from the registry will be used.

[illegible]



PHS 398 Cover Page Supplement Pages 1 and 2

- Companion forms to the (R&R) Cover Component providing NIH with additional needed information.
- For the PD/PI, includes **New Investigator** code & **Degree** fields.
- Includes **Clinical Trial** and **Agency-Defined Phase III Clinical Trial** indicators.
- For the Business Official Contact, includes complete contact information (*title & mailing address missing from section 5 of the R&R Cover*).
- Page 2 includes **Human Embryonic Stem Cells** item.

Budget Period: 1

[Reset Entries](#)

Start Date:

End Date:

A. Direct Costs

* Funds Requested (\$)

Direct Cost less Consortium F&A

Consortium F&A

* Total Direct Costs

B. Indirect Costs

Indirect Cost Type

Indirect Cost
Rate (%)

Indirect Cost
Base (\$)

* Funds Requested (\$)

1.	
2.	
3.	
4.	

Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date

Total Indirect Costs

C. Total Direct and Indirect Costs (A + B)

Funds Requested (\$)

Budget Period: 2

[Reset Entries](#)

Start Date:

End Date:

A. Direct Costs

* Funds Requested (\$)

* Direct Cost less Consortium F&A

Consortium F&A

* Total Direct Costs

B. Indirect Costs

Indirect Cost Type

Indirect Cost
Rate (%)

Indirect Cost
Base (\$)

* Funds Requested (\$)

1.	
2.	
3.	
4.	

Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date

Total Indirect Costs

C. Total Direct and Indirect Costs (A + B)

Funds Requested (\$)

PHS 398 Modular Budget



PHS 398 Modular Budget

- Alternative to the R&R Budget form that doesn't require detailed categorical information.
- Available to certain applicants requesting \$250,000 or less in Direct Costs per year.
- Applicants must request total direct costs in "modules" of \$25,000.
- Direct costs are separated from consortium F&A costs since these are not included in the \$250K limit.
- Cumulative Budget is system-generated.
- Form requires Budget Justification PDF text attachments for Personnel, Consortium and Other.

PHS 398 Research Plan

1. Application Type:

From SF 424 (R&R) Cover Page and PHS398 Checklist. The responses provided on these pages, regarding the type of application being submitted, are repeated for your reference, as you attach the appropriate sections of the research plan.

*Type of Application:

☐ New ☐ Resubmission ☐ Renewal ☐ Continuation ☐ Revision

2. Research Plan Attachments:

Please attach applicable sections of the research plan, below.

1. Introduction to Application	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
<small>(for RESUBMISSION or REVISION only)</small>				
2. Specific Aims	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
3. Background and Significance	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
4. Preliminary Studies / Progress Report	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
5. Research Design and Methods	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
6. Inclusion Enrollment Report	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
7. Progress Report Publication List	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment

Human Subjects Sections

Attachments 8-11 apply only when you have answered "yes" to the question "are human subjects involved" on the R&R Other Project Information Form. In this case, attachments 8-11 may be required, and you are encouraged to consult the Application guide instructions and/or the specific Funding Opportunity Announcement to determine which sections must be submitted with this application.

8. Protection of Human Subjects	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
9. Inclusion of Women and Minorities	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
10. Targeted/Planned Enrollment	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
11. Inclusion of Children	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment

Other Research Plan Sections

12. Vertebrate Animals	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
13. Select Agent Research	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
14. Multiple PI Leadership Plan	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
15. Consortium/Contractual Arrangements	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
16. Letters of Support	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
17. Resource Sharing Plan(s)	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment

18. Appendix	Add Attachments	Remove Attachments	View Attachments
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PHS 398 Research Plan

- Separate PDF attachments for each section.
- Same formatting requirements in the PHS 398 continue here—margins, page limits, etc.
- Appendix Material
 - Allows up to 10 separate attachments
 - Stored separately in the eRA grant folder, not as a part of the main application grant image
 - Accessible to appropriate NIH staff and peer reviewers



PHS 398 Research Plan: Helpful Hints

- Create as a single document using any word processing software to track page limits. Separate only at the end before uploading.
- **Do not** include headers or footers.
- **Do** include a section heading as part of the text; i.e., Specific Aims, Background & Significance.



PDF Attachment Hints

- Do not scan paper documents. Instead, produce documents with word-processing software and then convert electronically to PDF.
- Use meaningful titles for file names.
- Only use standard characters in file names: A-z, 0-9, Hyphen (-), Underscore (_).
- Disable write-protection features.
- A zero-byte attachment is an invalid PDF.

PHS398

Checklist Page 1

- Captures additional information on **Change of PD/PI and Change of Institution**

- Captures data on **Inventions and Patents**

1. Application Type:

From SF 424 (R&R) Cover Page. The responses provided on the R&R cover page are repeated here for your reference, as you answer the questions that are specific to the PHS398.

* Type of Application:

☐ New ☐ Resubmission ☐ Renewal ☐ Continuation ☐ Revision

Federal Identifier:

2. Change of Investigator / Change of Institution Questions

☐ Change of principal investigator / program director

Name of former principal investigator / program director:

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

☐ Change of Grantee Institution

* Name of former institution:

3. Inventions and Patents (For renewal applications only)

* Inventions and Patents: Yes ☐ No ☐

If the answer is "Yes" then please answer the following:

* Previously Reported: Yes ☐ No ☐

4. * Program Income

Is program income anticipated during the periods for which the grant support is requested?

☐ Yes

☐ No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period *Anticipated Amount (\$)

*Source(s)

5. Assurances/Certifications (see instructions)

In agreeing to the assurances/certification section 18 on the SF424 (R&R) form, the authorized organizational representative agrees to comply with the policies, assurances and/or certifications listed in the agency's application guide, when applicable. Descriptions of individual assurances/certifications are provided at: <http://grants.nih.gov/grants/funding/424>

If unable to certify compliance, where applicable, provide an explanation and attach below.

Explanation:

Add Attachment

Delete Attachment

View Attachment

PHS398

Checklist

Page 2

- Captures additional information on sources of **Program Income.**
- Allows PDF text upload if unable to certify compliance.

[Save & Submit](#)[Save](#)[Print](#)[Cancel](#)[Check Package for Errors](#)

Grant Application Package

Opportunity:	ADOBE R01 System-to-System Program Announcement
Offering Agency:	National Institutes of Health Stage
CFDA Number:	93.389
CFDA Description:	Research Infrastructure
Opportunity Number:	PA-S2-R01
Competition ID:	
Opportunity Open Date:	04/01/2007
Opportunity Close Date:	02/28/2010
Agency Contact:	NIHStage Developer For NIH Stage Development E-mail: schraden@od.nih.gov Phone: 123-456-7890

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name:

Mandatory Documents

SF424 (R and R)
PHS 398 Research Plan
PHS 398 Cover Page Supplement
PHS 398 Checklist
Research And Related Other Project Information
Research And Related Senior/Key Person Profile
Research And Related Project/Performance Site L

Move Form to
Complete

=>

Move Form to
Delete

<=

Mandatory Documents for Submission

[Open Form](#)

Optional Documents

Research And Related Budget
R and R Subaward Budget Attachment(s) Form
PHS 398 Modular Budget
PHS 398 Cover Letter File

Move Form to
Submission List

=>

Optional Documents for Submission



Application Submission


- Save the final application document and click “Check Package for Errors” on Grant Application Package Screen. This checks for Grants.gov errors, not NIH-generated errors.
- Once all documents are properly completed and saved the “Save and Submit ” button becomes active.
- Once submitted, verification and confirmation screens will appear, and applicants will receive a Grants.gov Tracking Number.



Application Submission

- Check header information one last time to confirm you are submitting to correct FOA and that it has not yet closed.

JavaScript Window



Application Submission Verification and Signature

Opportunity Title: NIH Adobe - SBIR Opportunities2
Offering Agency: National Institutes of Health Stage
CFDA Number: 93.389
CFDA Description: Research Infrastructure
Opportunity Number: PA-S3-SBR
Competition ID: none
Opportunity Open Date: 2008-06-09
Opportunity Close Date: 2009-06-09
Application Filing Name: Small Business Sample Application

Do you wish to sign and submit this Application?

Please review the summary provided to ensure that the information listed is correct and that you are submitting an application to the opportunity for which you want to apply.

If you want to submit the application package for the listed funding opportunity, click on the 'Sign and Submit Application' button below to complete the process.

If you do not want to submit the application at this time, click the 'Exit' button. You will then be returned to the previous page where you can make changes to the required forms and documents or exit the process.

If this is not the application for the funding opportunity for which you wish to apply, you must exit this application package and then download and complete the correct application package.

Warning: JavaScript Window



After Submission to Grants.gov

- After submission to Grants.gov, the **eRA system** performs agency validations.
 - Any errors must be fixed and the application resubmitted before it can be accepted for review
 - Warnings may not require fixing, but highlight potential problems/issues for applicants to consider
- If no eRA system errors identified, the eRA system will:
 - Assemble the grant image
 - Generate a Table of Contents
 - Include headers (PI name) & footers (page numbers) on all pages
- Applicants have a two business-day viewing window after successful receipt by NIH to ensure the application was submitted correctly.

424 R&R and PHS-398 Specific Table of Contents

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Additional Locations	<u> </u>
Research & Related Other Project Information	<u> </u>
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Public Health Relevance Statement	<u> </u>
Bibliography & References Cited	<u> </u>
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Handy Tools and Final Thoughts

<http://era.nih.gov/ElectronicReceipt/>

Electronic Submission

Paper No More, Use 424 (R&R)

Get prepared: Move to Adobe begins Dec. 2008

Most electronic submissions to NIH after Jan. 1, 2009 will require Adobe grant application forms.
Visit [Resources for Adobe Transition](#) for:

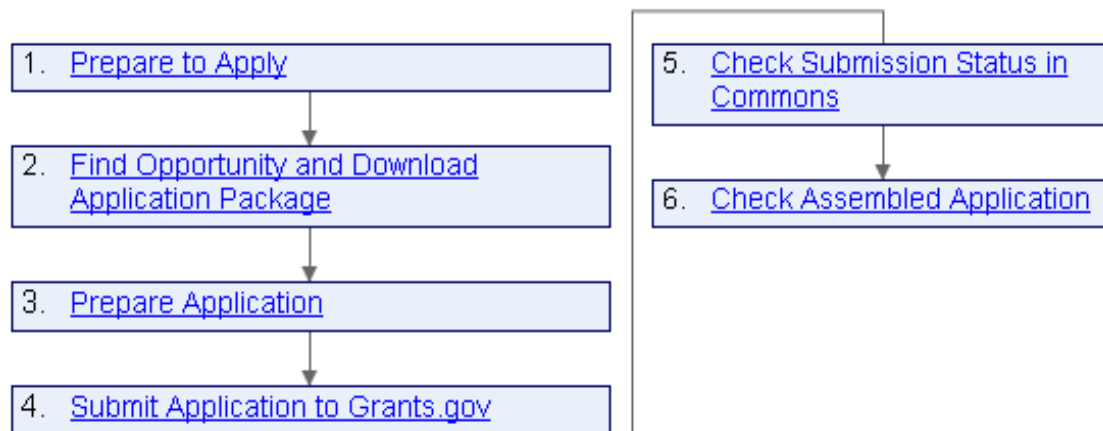
- [Transition schedule](#)
- [Required software](#)
- [Important to know](#)
- [Frequently Asked Questions](#)
- [Resources \(and more\)](#)

Parent Announcements

(Funding opportunities for Unsolicited or Investigator-Initiated Applications - **R01, R03, R13/U13, R15, R21**)

Electronic Application Process

[View Process Flow Chart \(PDF - 23 KB\)](#)



TIPS

- [PI](#) (PDF - 48 KB)
- [Small Biz](#) (PDF - 66 KB)
- [Reviewers](#) (PDF - 52.3 KB)
- [International](#) (PDF - 150 KB)
- [Q&A](#) (PDF - 36 KB)
- [Contact Info](#) (PDF - 30 KB)

Latest Updates

eSubmission News

- Visit [News and Events](#) to get the latest eSubmission news. (Sept. 29, 2008 news update posted)

[Archive...](#)

New Postings

- [Updated SF424 \(R&R\) Validations \(PDF - 798\)](#) posted (Oct. 10, 2008)
- [Resources for Adobe Transition](#) (Sept. 18, 2008)
- [Updated SF424 \(R&R\)](#)

[Home](#)

[Electronic Application Process](#)

[Transition Timeline \(from paper to electronic\)](#)

[Avoiding Common Errors](#)

[Frequently Asked Questions \(FAQs\)](#)

[Training](#)

[Resources](#)

[Finding Help](#)

[Site Map](#)

[eRA Commons](#)

[Intranet Link \(NIH Staff only\)](#)



<http://grants.nih.gov/grants/funding/424/index.htm>

Forms & Deadlines

Forms & Applications

[Submission Dates / Deadlines](#)

[Submitting Your Application](#)

Global OER Resources

[Glossary & Acronyms](#)

[Frequently Used Links](#)

[Frequent Questions](#)

SF424 (R&R) Application and Electronic Submission Information

The SF424 (R&R) is used for electronic submission gradually replacing the PHS 398. This page provides versions application guides and practice application packages for preparing your application. Also, see the [Electronic Submission of Grant Applications](#) page for more information.

PureEdge Application Instructions

One version of the application guide is currently available and is labeled as "Version 2 (to be used with applications packages indicating Version 2 or 2a)." This guide is to be used with funding opportunities using Version 2 of the SF424 (R&R) forms. These funding opportunities are clearly noted with a "VERSION-2-FORMS" or a "VERSION-2A-FORMS" in the "Competition ID" field of the forms package, and they continue to use PureEdge Viewer for submitting applications to Grants.gov.

Version 2a includes the use of the Research and Related Senior/Key Person Profile (Expanded) form in place of the previously used Senior/Key Person form. The expanded form allows the collection of structured data for up to 40 Senior/Key Persons. The expanded form appears in all application packages posted on/after November 15, 2006. This is the only change in the actual forms for packages noted as Version 2a.

Adobe Application Instructions

A separate version of the application guide to be used with the new Adobe Reader versions of the application forms is available (see NIH Guide Notice [NOT-OD-08-098](#)). These new forms are still in a **limited pilot test stage** and this guide should only be used when mentioned in the specific FOA.

These funding opportunities are clearly noted with "ADOBE-FORMS-PILOT" in the "Competition ID" field of the forms package. See NIH Guide Notice [NOT-OD-08-073](#) for more information on the NIH/AHRQ plan for transition from PureEdge to Adobe Reader application forms.

Sections on this Page:

[\[Instructions and Other Information \]](#) |
 [\[Additional Format Pages \]](#) |
 [\[Notable Changes \]](#) |
 [\[Contacts \]](#)

Instructions and Other Information	Date Posted	MS Word File	PDF File
PureEdge Instructions: Version 2 (including 2a) (To be used for FOAs clearly noted with "VERSION-2-FORMS" or "VERSION-2A-FORMS" in "Competition ID" field of SF424 (R&R) forms package.)			
Application Guide SF424 (R&R) - Version 2 (for use with PureEdge Viewer application forms)	08/01/2008	MS Word (2.5 MB)	PDF (3 MB)
SBIR/STTR Application Guide SF424 (R&R) - Version 2 (for use with PureEdge Viewer application forms)	08/01/2008	MS Word (2.7 MB)	PDF (3.2 MB)
Adobe Instructions: To be used for FOAs that indicate "Adobe-Forms-Pilot" in the "Competition ID" field of the SF424 (R&R) forms package.			



Training Tools:

- Registration in the eRA Commons Demo
http://era.nih.gov/virtualschool/external/c101_GranteeRegistrationProcess.htm
- Grants.gov's How to Complete An Application Package Demo
<http://www.grants.gov/CompleteApplication#demo>



Other Tools

- SF424 (R&R) application guides, additional format pages and related resources
<http://grants.nih.gov/grants/funding/424/index.htm>
- Frequently Asked Questions
<http://era.nih.gov/ElectronicReceipt/faq.htm>
- Frequently Asked Questions re: Person months
<http://grants.nih.gov/grants/policy/policy.htm#resources>
- Avoiding Common Errors
http://era.nih.gov/ElectronicReceipt/avoiding_errors.htm
- Resources for NIH Adobe Transition
http://era.nih.gov/ElectronicReceipt/adobe_transition.htm



Finding Help:

- Review application instruction guide(s)
- Contact Grants Info:

Grants Info

Phone: 301-435-0714

301-451-0088 (TTY)

Email GrantsInfo@nih.gov

- All other tools and resources are found at:
<http://era.nih.gov/ElectronicReceipt/index.htm>



Finding Help: Commons Registration & Validations

- If help is needed with the eRA Commons registration process for the applicant organization or PDs/PIs, or with the application validation process in the eRA Commons after submission through Grants.gov, contact:

eRA Commons Help Desk

Web: <http://ithelpdesk.nih.gov/eRA/>

Toll-free: 1-866-504-9552

Phone: 301-402-7469

TTY: 301-451-5939

Hours: Mon-Fri, 7a.m. to 8 p.m. Eastern Time

- Also visit:

eRA Commons website:

<https://commons.era.nih.gov/commons/index.jsp>



Collecting User Feedback

- NIH has established an e-mail address to collect comments and/or suggestions from users:

NIHElectronicSubmit@mail.nih.gov.

- Share your experiences—successes and challenges
- Share specific suggestions for improvement
- What resources are most useful (*Targeted e-mails, FAQs, Adobe Transition Resources, Avoiding Common Errors, Training tools*)



Questions?