SIU System Collaborative Grant (SSCG)

Purpose/Program Overview

The goal of the **SIU System Collaborative Grant program** is to promote **new** biomedical research collaborations and foster receipt of extramural funding for research projects between faculty at the various SIU campuses, including the School of Medicine, Edwardsville, and Carbondale. Thus, projects considered for funding should represent pilot studies for obtaining preliminary data for larger collaborative projects to be submitted for external funding.

Applications are due no later than 4:30pm central time on the Second Monday in September.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

For more information, visit https://www.siue.edu/funding/internal-funding/SIU-Collaborative.shtml

Eligibility

Have you and your collaborators previously published together as co-authors or worked together previously on internal or external grants? *

○ Yes
○ No

You are ineligible. The goal of the SSCG program is to promote new research collaborations between faculty in the SIU System.

Please contact siueresearch@siue.edu with any questions and review the program guidelines at https://www.siue.edu/funding/internal-funding/SIU-Collaborative.shtml.

Are you or any of your named collaborators previous recipients of a SIU System Collaborative Grant? *

○ Yes
○ No

Have the previous recipient(s) of the SIU System Collaborative Grant submitted an external proposal based upon the work on the awarded grant? *

○ Yes
○ No

Previous SIU System Collaborative Grant recipients must submit an external funding proposal related to their work on the grant.

Recipients who have failed to meet this condition are ineligible for this grant program until this requirement is met.

Acknowledgements

To continue with the application, you must agree to all of the following conditions by checking each box.

Prior Authorization *

☐ PIs attest to having obtained prior authorization from all responsible Department Chairs, including authorization for faculty and staff effort and cost sharing. PIs further attest that all personnel who are included in this proposal are knowledgeable about the application and have expressly agreed to participate as described.

External Submission Requirement *

☐ If funded, PIs agree to submit one or more proposals for external funding within one year of project end.

Final Report Requirement *

☐ If funded, PIs agree to submit a final report within 30 days of project end.

Personnel

Submitter *

Enter your name

Submitter Email *

Enter your email address

SIU System Campuses

Campuses *

Check the box(es) below to indicate each collaborating campus with a named Principal Investigator involved in the project.

☐ SIU Carbondale

☐ SIU Edwardsville

☐ SIU School of Medicine

Minimum of two campuses with a named PI must be involved in this project.

Principal Investigators

SIU Carbondale

Enter the contact information for the SIUC PI.

SIUC PI Name *

Department *

Phone *

SIUC PI Email *

SIU Edwardsville

Enter the contact information for the SIUE PI.

SIUE PI Name *

Department *

Phone *

SIUE PI Email *

SIU School of Medicine

Enter the contact information for the SIUSOM PI.

SIUSOM PI Name *

Department *

Phone *

SIUSOM PI Email *

Co-Investigators

Do you have any other co-investigators involved in this project? *

Include any other collaborators who are contributing to this project, but are not named as a principal investigator.

○ Yes

○ No

Click "Add Another" for each named co-investigator involved in the project.

Name

Campus

Department

Phone

Email

➕ **Add Another**

Compliance

Check the appropriate boxes below for any compliance-related approvals needed on each campus.

SIU Carbondale *	SIU Edwardsville *	SIU School of Medicine *
☐ IRB ☐ IACUC ☐ N/A	☐ IRB ☐ IACUC ☐ N/A	☐ IRB ☐ IACUC ☐ N/A

If applicable, briefly describe the compliance-related aspects of your project.

Required Application Materials

Project/Proposal Title *

Budget Summary

Enter the total requested budget for each campus. **Click "Add Another Row" to add a budget for the third campus.**

Each campus may request up to $10,000.

Campus *	Total Requested Budget *	🗑
- - - ⬍		🗑
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	sum: --	

➕ **Add Another Row**

Application Attachments *

The following attachments are to be uploaded as a **single PDF file** in the order indicated below. If any documents are missing or in the wrong order, the application will be returned. Applicants will have two business days to address any deficiencies in their application materials.

Use the following format when naming your PDF: "SSCG_PILastNames".

 For all sections, use 11-point Arial font, single-spaced. 1" margins.

Application Attachments:

1. Cover Page - **1 page**
2. Project Abstract and Health Relevance - **1 page**
3. Specific Aim(s) - **1 page**
4. Research Plan - **6 pages** with required headings
5. Budget Justification—**1 page, summarizing the total requested budget and campus allocations**
6. Budget (link to required template)
7. Facilities and Resources —**1 page**
8. References Cited — **no page limit but must be succinct**
9. Biosketch (link to NIH template or SciENcv creation tool. 5-page limit per Investigator)

Appendices are not allowed.

Select a File

Application Checklist

You must acknowledge that your proposal meets all of the following conditions in order to proceed with the submission.

☐ Proposal is for a "single year" project (extensions may not be permitted).

☐ We attest that we have adhered to all application requirements (page limits, font size, etc.)

☐ We attest that this is the only SSCG application we are submitting as PIs or Co-Investigators.