Name of Principal Applicant (Last name, first name)	Amount Requested

BANTING & BEST DIABETES CENTRE NOVO NORDISK-BBDC PILOT AND FEASIBILITY GRANTS 2024/2025 SONIA M. YUNG PILOT AND FEASIBILITY GRANT 2024/2025 APPLICATION SUBMISSION INSTRUCTIONS

<u>Eligibility</u>: Those who received a 2023/2024 Pilot and Feasibility Grant from the BBDC as principal applicant are not eligible to apply for this competition as principal or co-applicant.

Format: Single spaced text. Font size must not be smaller than 12, Times Roman or similar.

E-mail items 1 through 5 below to diabetes.bbdc@utoronto.ca as one PDF document in the order listed. Do not add security features to the PDF document such as password protection or document restrictions. The document should not exceed 10 MB in size.

- 1. A completed and signed application form.
- 2. CV of principal applicant and all co-applicants. Submit a Canadian Common CV printed in CIHR format (program or academic). Limit information to the past 5 years. If a Common CV is not available, applicants may submit a University of Toronto Web CV printed in curriculum vitae format. Limit information to the past 5 years. If there has been an interruption in pursuit of the applicant or co-applicant's scientific career, please provide an explanation and attach to the applicant's CV. Include length and reason for the scientific career interruption.
- **3.** Letters of Collaboration. If contributions from collaborators are expected, a signed statement from each collaborator describing the services to be provided must be included. The letters should be given to the principal applicant to be included with the application.
- 4. Equipment Quotation(s). If purchasing equipment up to \$10,000, attach cost quotation or service contract.
- 5. Publications. Up to 2 manuscripts and/or reprints relevant to this proposal may be included.

Note on Ethics Approvals and Certifications: If this research involves human subjects, animals, biohazards or stem cells, the successful principal applicant will be required to obtain approvals from their institution by the time of funding commencement on July 1. Approvals are not required to be submitted with this application; however, funds will not be released to successful applicants until all approvals have been obtained and forwarded to the BBDC.

APPLICATIONS MUST BE RECEIVED BY 4 P.M., NOVEMBER 28, 2023. Late or incomplete applications will not be considered.

The BBDC will confirm all applications received by e-mail. If you do not receive confirmation of application receipt, please send a separate e-mail requesting confirmation.

If you have difficulty submitting a large size application by e-mail, please contact Rose LaBarbera for alternate submission instructions.

Inquiries:

Rose LaBarbera Phone: (416) 978-4656

E-mail: diabetes.bbdc@utoronto.ca

BANTING & BEST DIABETES CENTRE FACULTY OF MEDICINE, UNIVERSITY OF TORONTO NOVO NORDISK-BBDC PILOT AND FEASIBILITY GRANTS 2024/2025 SONIA M. YUNG PILOT AND FEASIBILITY GRANT 2024/2025

Name of Principal Applicant (Last name, first name)	Institution	U of T Faculty and Department
Name of Co-applicants (Last name, first name)	Institution	Faculty and Department
Primary Location Where Research	Will Be Conducted:	
Title of Research:		
Total amount requested for 1-year		ution) (Each collaborator must provide a signed letter
describing the services to be provided		
Mailing Address of Principal Applic		none:
	En	nail:

BUDGET

- Ensure that the \$40,000 budget reflects the pilot nature and feasibility of the research proposal
- Eligible Expenses: Supplies, materials and services related to the research project; research staff and trainee support (i.e. fellows, graduate and summer students); trainee travel to conferences or attendance of virtual conferences.
- Purchases of equipment up to \$10,000 are eligible if clearly justified in the budget.
- Ineligible Expenses: Use of funds for investigators' salaries, investigator travel to conferences or attendance of virtual conferences, or institutional overhead fees are <u>not</u> permitted.

Research Staff/Trainees	Number	Salary	Benefits	Total
				\$
				\$
				\$
Total Research Staff/Trainees:				\$
Animals			\$	
Expendables				\$
Services				\$
Other materials and supplies				\$
Total Animals, Expendables, Services, Materials & Supplies:			\$	
Equipment				\$
				\$
			Total Equipment:	\$

TOTAL REQUEST \$ _____

BUDGET JUSTIFICATION
Justify the need for <u>each</u> item and amounts requested on the previous BUDGET page. Provide a detailed explanation of equipment up to \$10,000. Do not exceed this page.
If requesting funds for equipment, attach cost quotation or service contract.

Name of Principal Applicant:
Title of Research:
SUMMARY OF RESEARCH PROPOSAL IN LAY LANGUAGE
Provide a clear summary of the research proposal in <u>lay language</u> . Think about how you would explain the project to someone who does not have a scientific or medical background. Provide background, hypothesis, objective(s), approach, research plan, and relevance to diabetes in the simplest terms possible. Use straightforward, non-technical language and spell out or describe acronyms and abbreviations. Do not exceed this space.

RESEARCH PROPOSAL (Page 1 of 2)
Include background, hypothesis, specific aim(s), objective(s), and research plan. Grants are \$40,000, one-year awards. Therefore, the scope of the proposal and budget must reflect this otherwise the application will be given a low score for feasibility.
Proposal must not exceed the two pages provided in this application form. Limit figures and tables to two additional pages which have been provided in this application form. References may be listed on pages 10 and 11.

RESEARCH PROPOSAL (Page 2 of 2)

FIGURES AND TABLES FOR RESEARCH PROPOSAL (Page 1 of 2)		
Do not exceed the 2 pages provided.		

FIGURES AND TABLES FOR RESEARCH PROPOSAL (Page 2 of 2)
If this page is not needed, leave it blank.

REFERENCES FOR RESEARCH PROPOSAL (Page 1 of 2)
Use the following two pages to list references only. Do not exceed the 2 pages provided.

REFERENCES FOR RESEARCH PROPOSAL (Page 2 of 2)
If this page is not needed, leave it blank.

LEVANCE TO DIABETES	
plain how this project is directly relevant to diabetes. Do not exceed this page. (This funding program supports original covery-based fundamental or clinical research in diabetes that would be published in peer-reviewed scientific journals. search proposals can include any aspect of laboratory, animal, human, or clinical or health services research. Areas of earch which are considered relevant to diabetes include the pathogenesis of diabetes or its complications, homeostatic or chological pancreatic islet function, or metabolism, pharmacological mechanisms of drug or hormone action, biochemical or lecular aspects of biological or pathological processes, or research in population health or health services.)	

PILOT AND FEASIBILITY JUSTIFICATION
Justify this proposal as being a pilot and feasibility project. For all established investigators listed on this application, explain clearly how this project constitutes a <u>completely new</u> initiative in diabetes research for you and is not just an extension of, or related to, ongoing research efforts. Explain why the proposal cannot be funded from your currently held support. Do not exceed this page.

FUNDING OVERLAP

TO BE COMPLETED BY THE PRINCIPAL APPLICANT AND EACH CO-APPLICANT.

The principal applicant and co-applicants are required to inform the BBDC of any related support currently held or applied for from other funding sources, and to what extent, if any, such support overlaps with this BBDC Pilot and Feasibility Grant request. In the event that a successful applicant is also offered funding by another agency, the applicant must notify the BBDC within 2 weeks of receiving the offer. The applicant must accept funding from the other agency. In the space below, list any overlap of funds with this application and support currently held or applied for by the principal applicant or co-applicants.				

NAME OF INSTITUTION AND FINANCIA	L OFFICER WHO WIL	L ADMINISTER THE	: FUNDS
The grant is to be administered by the institute).	tution where the resea	arch will take place (i.e	e. the University of Toronto or affiliated
Name of Institution:		Name of Research Financial Services Officer:	
Address of Research Finance Office:			
		Phone:	
		E-mail:	
SIGNATURES			
Signing this application form constitutes an Grants program. The principal applicant ce			
If the grant is to be administered by the Un Chair. If the grant is to be administered by Research Institute Director. Digital signature	a hospital research in		
Principal Applicant	University Department Chair		Hospital Research Institute Director
Print Name:	Print Name & Title:		Print Name & Title:
Signature:	Signature:		Signature:
Date:	Date:		Date:

SIGNATURES OF CO-APPLICANTS					
Each co-applicant listed on page 2 of this application must sign this application. Digital signatures are acceptable.					
Print name:	Signature:	Date:			
Print name:	Signature:	Date:			
Print name:	Signature:	Date:			
Print name:	Signature:	Date:			
Print name:	Signature:	Date:			