

**SAN ANTONIO MEDICAL FOUNDATION  
GRANT APPLICATION FORM AND ATTACHMENTS FOR COLLABORATING ENTITIES  
2023 CYCLE**

**IMPORTANT: READ GRANT GUIDELINES FOR COLLABORATING ENTITIES BEFORE BEGINNING APPLICATION**

**PROPOSAL COVER PAGE (USE ATTACHMENT A)**

The Proposal Cover Page must be a clear, well written executive summary that summarizes the essential content of the proposal – including the targeted public health issue, proposed innovative research or collaboration likely to result in innovation and potential significance of the proposed effort. There must be at least two collaborating organizations involved in a proposed project. (A project with only departments within one organization does not qualify.) Describe why the results will raise the profile of San Antonio in healthcare and the biosciences.

**PROJECT DESCRIPTION**

**The project description must include, in this order:**

- A. Title of Project (5 word maximum);
- B. General background on the targeted public health issue or disease of global impact;
- C. Description of an unconventional, ground-breaking approach to the problem outlined in the topic and how the proposed research or other collaboration is of high risk – high reward;
- D. Description of how the research has the potential for major social impact;
- E. *“The mission of the San Antonio Medical Foundation is to provide leadership and active stewardship of our land and other assets to improve healthcare, advance biomedical science and enhance community well-being.”* Describe how the program or activity recommended for grant consideration relates to the mission of the SAMF;
- F. Specific goals, objectives and anticipated results; and a description of methods including anticipated barriers or technical difficulties;
- G. Describe how the value or benefit to be obtained through the grant, if awarded, is to be tracked and measured; and
- H. Specify the resources needed for this project (equipment, materials, etc.) and indicate their availability.

The project description must be concise, limited to three typed, single-spaced pages with an Arial font, size of 11 points. One-inch margins must be maintained. If you feel additional information is important to submit, an appendix may be included, but there is no obligation for reviewers to read it. A violation of this format will result in your proposal not being reviewed.

**JOINT EXECUTION PLAN**

Summarize the task-level activities to be performed by each organization as they relate to the overall project’s objectives. Describe areas of interdependence, the coordination and handoff of interim project materials and data, and the timeline of each organization’s participation in the overall project efforts. While no specific graphical format or presentation is required, this section is expected to contain a mixture of narrative and graphical information to aid the evaluators’ assessment of the proposed scope, roles and responsibilities within the team and collaboration environment. If any intellectual property is created or used during the proposed program or activity, describe who would own the intellectual property.

## **BUDGET SUMMARY (USE ATTACHMENT B) AND BUDGET JUSTIFICATION**

Awards will be up to \$200,000 for a grant performance period from date of funding to end of following calendar year but multi-year requests will be accepted. ***Roll over to the next grant year is not allowable and one two-month project extension will be allowed upon request if it is due to something out of your control, such as the shutdown from the COVID-19 pandemic.*** If the amount awarded is less than the aggregate cost of the entire project, the SAMF may request assurances of availability of gap funding without sacrificing the scope of the research project or extending the timeline for completion of the work prior to disbursing the funds. Funding that is not spent or encumbered by each organization's funding timeline requirements will automatically revert back to the SAMF.

Budget summaries must be submitted on the approved budget page (use Attachment B). In addition, a budget justification (no more than 1 page per Initiative Leader) must be submitted providing details for all proposed expenditures and any other funding sources, for each organization.

The budget justification must address each budget line item on Attachment B that contains a proposed cost, for each organization. The budget justification must convey an integrated understanding of the types of resources (labor, materials, other) necessary to complete the proposed effort.

### **Follow-up Budget Considerations**

#### **Salaries and Wages (Compensation)**

##### **Allowed:**

Post-doctoral fellow,  
Graduate students,  
Research technicians,  
Other non-faculty project personnel.

##### **Disallowed:**

Faculty,  
Employees,  
Fringe benefits (health insurance, other insurances, company car, pension, etc.)  
Graduate student stipends and tuition.

#### **Indirect Costs, Overhead, Facilities and Administration**

##### **Allowed:**

Research related equipment,  
Graduate student research or collaboration travel directly related to the project,  
Materials and supplies related to project,  
Publications related to project,  
Consultant services are only allowable if necessary for the completion of the project.

##### **Disallowed:**

Office equipment,  
Computers (unless specifically justified with prior approval),  
Workspace/lab/building expense,  
Utilities,

Travel not related to project research (e.g., conferences cannot be supported by this grant),  
Any other overhead or administration expense not specifically listed under allowed costs.

### **BIOGRAPHICAL SKETCH**

Complete for each Initiative Leader. **Do not exceed two pages for each.** Each Initiative Leader may use its own organization's native format and content for their biographical sketch for this proposal.

### **AWARDEE RESPONSIBILITIES (USE ATTACHMENT C)**

The Initiative Leader for each entity must agree to the responsibilities listed by filling out and signing the Awardee Responsibilities. The appropriate Department Chair/Vice President of Research (or equivalent level) must also agree to the responsibilities by signing the Awardee Responsibilities.

### **PEER REVIEW**

Applications will be reviewed by the SAMF Grant Review Committee. This committee may consist of a combination of internal and external reviewers, approved by the SAMF Grant Review Committee.

Proposals will be reviewed by a panel with broad expertise. These reviewers may not be deep domain experts in your field. You must describe your idea in clear language without the use of jargon unique to your field.

### **GRANT ADMINISTRATION**

The main organization on the grant must be specified. The main organization on the grant will receive the funds and distribute them appropriately to each collaborating organization. Each Initiative Leader is responsible for the administration of grant funds within the terms of their respective organizations' rules and regulations. In particular, he/she must be certain that cost overruns do not occur and that all funds are fully expended according to grant year end deadlines. All work must be completed in the approved grant performance period.

### **FINAL REPORTING REQUIREMENTS**

Each Initiative Leader is responsible to present a Final Grant Report to the SAMF Board at their meeting in October of the year following disbursement of funds. Awardees will be provided final reporting instructions prior to the start of their project.

Awardees must produce a new proposal for extramural funding identifying all third-party funds requested/committed for the initiative as part of the final reporting requirements within one year of completion of the project. In exceptional cases, where such funding may prove the project to be ultimately non-competitive, a waiver of the extramural proposal requirement can be requested from the SAMF Grant Review Committee. If neither an extramural proposal nor letter of explanation is submitted, no new SAMF research funds will be made available for the Initiative Leader until the letter or extramural proposal is submitted. The Initiative Leader must submit a report describing the extramural proposal submission details within one year of completion of the project.

## **PROGRAM TIMELINE**

November 2022 – Grant Request for Proposals (RFP) Announced

December 15, 2022 – Notice of Intent Due

Email to [pam@samedfoundation.org](mailto:pam@samedfoundation.org)

March 31, 2023 – Grant Proposals Due (Received by 5:00 p.m.)

Email to [pam@samedfoundation.org](mailto:pam@samedfoundation.org)

2<sup>nd</sup>/3<sup>rd</sup> Qtr 2023 – Award Winners Announced

4<sup>th</sup> Qtr 2023 – Grant Performance Period Begins (Funding Begins)

October 2024 - Final Report Presentation at SAMF Board Meeting (TBD)

End of Grant – Summary Report on Extramural Funding Submission Identifying all Third Party Funds Received/Committed for the Initiative

## **CONTACT INFORMATION**

Pam Leissner

Director, Board and Public Relations

San Antonio Medical Foundation

Phone: (210) 614-3724

Email: [pam@samedfoundation.org](mailto:pam@samedfoundation.org)



**SAN ANTONIO MEDICAL FOUNDATION  
GRANT APPLICATION ATTACHMENTS FOR COLLABORATING ENTITIES**

**ATTACHMENT B: BUDGET SUMMARY**

**BUDGET**

- 1. Total Proposed Labor (Salary/Wages Only) Cost:
- 2. Equipment (\$5,000 or more):
- 3. Travel (Foreign or Domestic):
- 4. Participant Support Costs:
- 5. Materials and Supplies:
- 6. Publications:
- 7. Consultant Services:
- 8. Computer Services:

**Total** \_\_\_\_\_ **Request:**

**BUDGET**

- 1. Total Proposed Labor (Salary/Wages Only) Cost:
- 2. Equipment (\$5,000 or more):
- 3. Travel (Foreign or Domestic):
- 4. Participant Support Costs:
- 5. Materials and Supplies:
- 6. Publications:
- 7. Consultant Services:
- 8. Computer Services:

**Total** \_\_\_\_\_ **Request:**

**BUDGET**

- 1. Total Proposed Labor (Salary/Wages Only) Cost:
- 2. Equipment (\$5,000 or more):
- 3. Travel (Foreign or Domestic):
- 4. Participant Support Costs:
- 5. Materials and Supplies:
- 6. Publications:
- 7. Consultant Services:
- 8. Computer Services:

**Total** \_\_\_\_\_ **Request:**

**SAN ANTONIO MEDICAL FOUNDATION  
GRANT APPLICATION ATTACHMENTS FOR COLLABORATING ENTITIES**

**ATTACHMENT C: AWARDEE RESPONSIBILITIES  
(TO BE FILLED AND SIGNED OUT BY EACH COLLABORATING ENTITY)**

**ORGANIZATION:** \_\_\_\_\_

**AWARDEE RESPONSIBILITIES**

If this collaboration proposal is funded, I agree that my acceptance obligates me to:

- 1) Include the following acknowledgement on all publications resulting from this grant award. *“This grant was funded (fully or in-part) by the San Antonio Medical Foundation.”*

**Adhere to the below timeline:**

**PROGRAM TIMELINE**

- 2) November 2022 – Grant Request for Proposals (RFP) Announced
- 3) December 15, 2022 – Notice of Intent Due
- 4) Email to pam@samedfoundation.org
- 5) March 31, 2023 – Grant Proposals Due (Received by 5:00 p.m.)
- 6) Email to pam@samedfoundation.org
- 7) 2<sup>nd</sup>/3<sup>rd</sup> Qtr 2023 – Award Winners Announced
- 8) 4<sup>th</sup> Qtr 2023 – Grant Performance Period Begins (Funding Begins)
- 9) October 2024 - Final Report Presentation at SAMF Board Meeting (TBD)
- 10) End of Grant – Summary Report on Extramural Funding Submission Identifying all Third Party Funds Received/Committed for the Initiative
- 11) Respond to all inquiries and communications from the SAMF related to the SAMF funded project.
- 12) Participate in SAMF initiatives to educate others regarding your collaborative efforts, including being available to present to our board upon request, being available and responsive to any media inquiries, participating in the grant kickoff event for the 2024 grant cycle upon SAMF request, and participating in any collaborative research workshops that are convened by the SAMF.
- 13) Your sponsoring institution will work in cooperation with the SAMF in publicizing the work being performed under the grant. We encourage sponsoring institutions to publicize the receipt of the grant and the fact that the grant was made possible by the San Antonio Medical Foundation.

Signature of Initiative Leader:  
Printed Name of Initiative Leader:  
Project Name:  
Date:

**Department Chair / Vice President of Research (or equivalent level)**

Please sign below to assure the review committee that you agree to the Initiative Leader’s obligations and responsibilities under this funding opportunity.

Department: \_\_\_\_\_  
Approved by: \_\_\_\_\_  
Department Chair Signature of Approval: \_\_\_\_\_