All new opportunities – those that were made public this week - will be placed in the front portion of the report. Current opportunities that have not yet reached their deadline will follow. Please note that all funding opportunities are subject to change without notice.

**New! T32 Training Program for Institutions That Promote Diversity**

Sponsor: NIH; National Heart, Lung, and Blood Institute  
Deadline: LOI February 18, 2015

The purpose of this funding opportunity announcement (FOA) is to enhance the participation of individuals from diverse backgrounds underrepresented in cardiovascular, pulmonary, hematologic and sleep disorders research across the career development continuum. The NHLBI’s T32 Training Program for Institutions That Promote Diversity is a Ruth L. Kirschstein National Research Service Award Program intended to support training of predoctoral and health professional students and individuals in postdoctoral training institutions with an institutional mission focused on serving health disparity populations not well represented in scientific research, or institutions that have been identified by federal legislation as having an institutional mission focused on these populations, with the potential to develop meritorious training programs in cardiovascular, pulmonary, hematologic, and sleep disorders. The NHLBI's T32 Training Program for Institutions That Promote Diversity is designed to expand the capability for biomedical research by providing grant support to institutions that have developed successful programs that promote diversity and serve health disparity populations and that offer doctoral degrees in the health professions or in health-related sciences. These institutions are uniquely positioned to engage minority and other health disparity populations in research, translation, and implementation of research advances that impact health outcomes, as well as provide health care for these populations. The primary goals of the T32 Training Program for Institutions That Promote Diversity are to: (1) contribute to the expansion of the future pool of individuals from diverse backgrounds underrepresented in research areas of interest to the NHLBI, (2) enable trainees to increase their competitiveness for peer-review research funding, (3) strengthen publication records of trainees, and (4) foster institutional environments conducive to professional development in the biomedical sciences.


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**AACR Ocular Melanoma Foundation Fellowship**

Sponsor: AACR  
Deadline: December 17, 2014

“This fellowship represents a joint effort to encourage and support a postdoctoral or clinical research fellow to conduct ocular/uveal melanoma research and to establish a successful career path in ophthalmology, ocular oncology, uveal melanoma cancer biology or similar field. The research proposed for funding may be basic, translational or clinical in nature and must have direct, primary applicability and relevance to ocular/uveal melanoma or, if applicable to cutaneous melanoma as well, be focused primarily on uveal melanoma and its specific cancer biology.”


**Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Parent Admin Supp)**

Sponsors: US Department of Health and Human Services; NIH  
Deadline: January 31, 2017

“The NIH hereby notify Program Directors/Principal Investigators holding specific types of NIH research grants listed in the full FOA that funds may be available for administrative supplements to meet increased costs that are within the scope of the approved award, but were unforeseen when the new or renewal application or grant progress report for non-competing continuation support was submitted. Applications for administrative supplements are considered prior approval requests and will be routed directly to the Grants Management Officer of the parent award.”

**Advanced Development of Informatics Technology (U24)**
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: November 18, 2014

“The purpose of this FOA is to invite U24 applications for advanced development and enhancement of emerging informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge in cancer research. An emerging informatics technology is defined as one that has passed the initial prototyping and pilot development stage, has demonstrated potential to have a significant and broader impact, has compelling reasons for further improvement and enhancement, and has not been widely adopted in the cancer research field. If successful, these technologies would accelerate research in cancer biology, cancer treatment and diagnosis, cancer prevention, cancer control and epidemiology, and/or cancer health disparities. This FOA is one component of the NCI’s ITCR Initiative whose central mission is to promote research-driven informatics technology development. Potential applicants who are interested in early-stage development should consult companion FOAs listed above.”


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**Advancing Interventions to Improve Medication Adherence (R01)**  
**Advancing Interventions to Improve Medication Adherence (R21)**
Sponsor: US Department of Health and Human Services; NIH
Deadline: January 7, 2015

“This funding opportunity announcement (FOA) is being issued by the NIH Adherence Network through the Office of Behavioral and Social Sciences Research (OBSSR), with participation from multiple NIH Institutes and Centers. This FOA seeks Research Project Grant (R01) applications that propose interventions to significantly improve medication adherence in individuals. Applications may target medication adherence in the context of treatment for a single illness or chronic condition (e.g., hypertension), to stave off a disease recurrence (e.g., cancer) or for multiple comorbid conditions (e.g., hypertension, diabetes, alcohol use disorders and HIV/AIDS). A well-articulated theoretical or conceptual framework is key for applications encouraged under this announcement. Primary outcomes of the research can include a patient self-report of medication adherence, but must also at least one non-self-report measure of medication adherence (e.g., pharmacy refill records, electronic monitoring, etc.). In addition, applications are encouraged to include a relevant health outcome or biomarker (e.g., blood pressure, viral load in HIV-infected individuals, cholesterol levels, HbA1c) that is expected to be affected by changes in the targeted adherence behavior. For diseases without identified biomarkers, inclusion of a clinical assessment (e.g., a medicine blood level, diagnostic interview or an independent clinician rating of the symptoms and behaviors) may be considered.”

Sources:  

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**AGA – Caroline Craig Augustyn and Damian Augustyn Award in Digestive Cancer**
Sponsor: American Gastroenterological Association (AGA); AGA Research Foundation
Deadline: January 16, 2015

“This award is for a young investigator who currently holds a federal or non-federal career development award devoted to conducting research related to digestive cancer. The objective is to support young investigators conducting research relevant to the pathogenesis, prevention, diagnosis, or treatment of digestive cancer. The award is intended to supplement existing career development funding.”


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**AHNS Pilot Grant**
Sponsor: American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS); AAO-HNS Foundation
Deadline: December 15, 2014

“The purpose of this award is to support basic, translational, or clinical research projects in head and neck oncology. Clinical or translational research studies are strongly encouraged and should be specifically related to the prevention, diagnosis, treatment, outcomes, or pathophysiology of head and neck neoplastic disease. Research supported by this award should be specifically directed toward the pathogenesis, pathophysiology, diagnosis, prevention, or treatment of head and neck neoplastic disease, and may be either basic or clinical/translational in approach. While not specifically required, proposals that aim to introduce new knowledge and methodology from other disciplines to research in head and neck disease, or which demonstrate collaborative effort with members of other related disciplines are encouraged. Projects must be designed so as to yield useful information within the period of award, but priority will be given to projects that are also innovative with promise to develop into new long-range or expanded research programs capable of...
attracting funding from other sources. The grant application must be accompanied by letters of support from the chair of the candidate's academic department and from the principal scientific advisor or mentor. These letters are to indicate a general level of support of the applicant, the fact that the department will make time, space, and other resources accessible for completion of the project, and that the applicant will have appropriate supervision/support throughout the period of the grant. Applicants must obtain letters of support/understanding from all key personnel on the project.


**Albert Lasker Basic Medical Research Award**

**Sponsor:** Albert and Mary Lasker Foundation  
**Deadline:** February 2, 2015

“The major purpose of the Lasker Medical Research Awards is to recognize and honor individuals who have made significant contributions in basic or clinical research in diseases that are the main cause of death and disability. The Basic Medical Research Award honors the scientist or scientists who have made fundamental investigations that open new areas of biomedical science. Additional information: [http://www.laskerfoundation.org/nominate.htm](http://www.laskerfoundation.org/nominate.htm)


**ASGE Endoscopic Research Awards**

**Sponsor:** American Society of Gastrointestinal Endoscopy  
**Deadline:** January 30, 2015

“ASGE Endoscopic Research Awards are offered to investigators for projects in basic, translational and clinical research in endoscopy. The objective of this award is to promote research in gastrointestinal endoscopy. The ASGE is particularly interested in endoscopic research pertaining to: colorectal cancer, Barrett’s esophagus, training/credentialing/simulation, issues specific to under-represented minorities (defined as women and individuals of diverse ethnic/cultural backgrounds), measuring/improving quality and efficiency, endoscope reprocessing and infection control, endoscopy/anesthesia monitoring and preparation, comparative effectiveness, NOTES®, novel endoscopic treatments for obesity, endoscopic ultrasound, endoscopic retrograde cholangiopancreatography (ERCP), and other endoscopically-guided imaging/intervention. The research committee will consider funding "seed" projects if there is an explicit outline for subsequent projects, and their funding plan (e.g. NIH, VA Merit), based on the preliminary data generated by the proposed pilot. Requests for funding pilot studies that will generate needed preliminary data to justify a larger clinical trial, as well as larger requests for definitive studies, will be considered. Grants are awarded based on the scientific merit of the proposal and assessment of the investigator's ability to complete the project (supportive environment, experience, training, availability of patients and other resources needed). The proposed research project must be approved by the ASGE Research Committee and should also be of such quality as to lead to presentation at Digestive Disease Week® and subsequent full publication. One objective of these awards is the eventual submission of larger research funding requests, including federal funding, and proposals with such potential will be given priority.”


**Biomedical Research Grants**

**Sponsor:** American Lung Association; Research Awards and Grants Program; Independent Investigator Awards  
**Deadline:** December 15, 2014

“The objective of the grant is to provide seed monies to junior investigators researching the mechanisms of lung disease and general lung biology. The goals of the Awards and Grants Program are to:

1. foster laboratory, patient-centered and social-behavioral research designed to prevent and relieve the suffering associated with all lung diseases and corresponding risk factors
2. fund researchers at important crossroads of their careers to gain long-term commitment to lung disease research”


**Brain Research Foundation Seed Grant**

**Sponsor:** Brain Research Foundation Fay/Frank Seed Grant Program  
**Deadline:** LOI January 8, 2015

“UIC is one of 29 U.S. institutions which have been invited to nominate faculty members to submit a Letter of Intent for the 2015 Seed Grant Program. The purpose of the Program is to provide start-up money for new research projects and innovative programs that have the potential of becoming competitive for an NIH grant or other external funding sources. To be eligible, the PI must be a full-time Assistant or Associate Professor working in the field of neuroscience. To be eligible, PI must be a full-time Assistant or Associate Professor at an invited institution, working in the area of studies of
brain function. This includes molecular and clinical neuroscience as well as studies of neural, sensory, motor, cognitive, behavioral and emotional functioning in health and disease. The grant proposal must detail a new research project that is not funded by other sources.”


Brain Tumor Research Proposal

Sponsor: Accelerate Brain Cancer Cure (ABC2)
Deadline: Continuous

“Accelerate Brain Cancer Cure is a non-profit organization that partners with leading entrepreneurs, scientists and researchers to find a cure for brain cancer. Accelerate Brain Cancer Cure funds projects at each stage of the drug development pipeline to ensure promising leads are advanced as quickly as possible. The pre-clinical screening program breaks down barriers to entry, academic grants focus on novel therapies, and industry investments bring the most promising treatments to patients quickly. Accelerate Brain Cancer Cure has awarded more than $20 million in brain tumor research funding to world-renowned research investigators and physician-scientists from 42 institutions. These partners all share the vision of driving translational research to move treatments as fast as possible from basic discovery to the clinic.” Source: “Brain Tumor Research Proposal.” Pilot. UIC, 4 May 2014. Web. 7 May 2014. <http://pivot.cos.com/funding_opps/98517>.

Breast Cancer Patient Navigation Programs: Navigation Following Abnormal Findings

Sponsor: Susan G. Komen for the Cure
Deadline: November 19, 2014

“Breast cancer disparities are differences in breast cancer outcomes among specific population groups. These groups may include, but are not limited to, those characterized by race/ethnicity, religion or nationality, socioeconomic status, age, sexual orientation, geography, or disability. There are many reasons for the observed disparities in breast cancer outcomes amongst these populations. However, differences in the prevalence of established breast cancer risk factors, as well as barriers to quality care are often responsible. Barriers to quality care that may lead to disparities in breast cancer outcomes fall into a number of categories: Financial and economic; Language and cultural; Communication; Health care system; Transportation; Bias based on culture/ race/ age/ sexual orientation; Fear. Patient navigation is a process by which an individual - a patient navigator - guides patients through and around barriers in the complex cancer care system to help ensure timely diagnosis and treatment. Patient navigation helps ensure that patients receive culturally competent care that is also: Confidential; Respectful; Compassionate; Mindful of the patient's safety. Evidence has shown an improvement in 5-year survival rates of breast cancer patients who were navigated from screening through resolution. Because of this strong connection to improved outcomes, Komen is accepting applications that support, expand or create patient navigation programs specifically for patients who are notified of an abnormality after an initial breast imaging test, such as a screening mammogram, diagnostic mammogram, or breast ultrasound. Programs should focus on coordinating and improving access to and timely utilization of breast health services through the Breast Cancer Continuum of Care at any point after an abnormal breast imaging test. Examples of appropriate patient navigation programs may include, but are not limited to those that: Link patients with appropriate care after an abnormal finding on a breast imaging test, and assist in moving women through the healthcare system; Provide linkages to community resources for financial assistance, transportation, family needs, and/or translation services; Provide education and psychosocial support to patients and their families as they move through the breast cancer continuum of care; Seek to enhance services for an identified vulnerable population, such as the hiring of culturally and/or linguistically competent patient navigators.”


Breast Cancer Research Program (BCRP) Breakthrough Award Levels 1 and 2

Sponsor: Defense Health Program, Department of Defense, Congressionally Directed Medical Research Programs
Deadline: December 3, 2014

“The BCRP challenges the scientific community to design research that will address the urgency of ending breast cancer. Specifically, the BCRP seeks to accelerate high-impact research with clinical relevance, encourage innovation and stimulate creativity, and facilitate productive collaborations. Considering the current breast cancer landscape and the BCRP’s vision to end breast cancer, each FY14 BCRP Breakthrough Award application must address at least one of the following overarching challenges. Alternatively, with adequate justification, applications may identify and address another overarching challenge related to the breast cancer landscape. Justification must be provided in the application.

• Prevent breast cancer (primary prevention)
• Identify what makes the breast susceptible to cancer development
• Determine why some, but not all, women get breast cancer
• Distinguish aggressive breast cancer from indolent cancers
• Conquer the problems of overdiagnosis and overtreatment
• Identify what drives breast cancer growth; determine how to stop it
• Identify why some breast cancers become life-threatening metastasis
• Determine why/how breast cancer cells lay dormant for years and then re-emerge; determine how to prevent recurrence
• Revolutionize treatment regimens by replacing interventions that have life-threatening toxicities with ones that are safe and effective
• Eliminate the mortality associated with metastatic breast cancer


Caring for Carcinoid Foundation – AACR Grant for Carcinoid Tumor and Pancreatic Neuroendocrine Tumor Research
Sponsor: AACR
Deadline: November 19, 2014

“This grant represents a joint effort to promote and support innovative cancer research. This grant is available to full time, independent junior and senior investigators to develop and study new ideas and innovative approaches that have direct application and relevance to carcinoid tumors or pancreatic neuroendocrine tumors. Applications are invited from researchers currently in the field as well as investigators with experience in other areas of cancer or biomedical research who have promising ideas and approaches that can be applied to carcinoid tumor or pancreatic neuroendocrine tumor research. Proposals will be accepted for new ideas and innovative approaches that have direct application and relevance to carcinoid tumors and pancreatic neuroendocrine tumors. Proposed research projects can be in any discipline including basic, translational, clinical, or epidemiological cancer research. The research priorities of the Caring for Carcinoid Foundation include a desire to equitably provide support for both carcinoid tumor and pancreatic neuroendocrine tumor research. Genomic, RNA, and proteomic studies of carcinoid tumors and pancreatic neuroendocrine tumors that complement ongoing genome-wide sequencing efforts funded by Caring for Carcinoid Foundation will be considered, but submission of studies that are duplicative of projects currently funded by the Caring for Carcinoid Foundation should be avoided.”


CBC High Throughput Screening Supplemental Grant Program
Sponsor: Chicago Biomedical Consortium
Deadline: November 18, 2014

“In response to the community-wide interest in High Throughput Screening (HTS), the CBC is offering a CBC HTS Supplemental Grant Program to help fund discovery of innovative small-molecule probes and “hits”. The intent of this program is to support pilot projects, which are focused on biomedically-relevant targets and which will be conducted at a HTS core facility located at one of the CBC universities. For a brief overview of HTS technology, please click here. The three CBC university-based HTS facilities each have an array of chemical libraries and assays, as well as the instrumentation and expertise to screen thousands of compounds. In addition, the facilities offer a variety of specialized capabilities: The University of Illinois at Chicago HTS Facility offers access to liquid handling platforms that are integrated with a range of assay equipment and instruments for photometric analysis. The HTS facility provides access to over 100,000 drug-like compounds. Facility overview: pdf slide presentation; Facility website: www.rrc.uic.edu/hts
Contact: Kiira Ratia, Director; Email: kratia@uic.edu


Change of Grantee Organization (Type 7 Parent) 139561
Sponsor: US Department of Health and Human Services; NIH
Deadline: unspecified

“The NIH hereby notify grantee organizations holding specific types of NIH grants, listed in the full FOA, that applications for change of grantee organization may be submitted in response to this FOA. This assumes such a change is programmatically permitted for the particular grant. Applications for change of grantee organization are considered prior
approval requests (as described in Section 8.1.2.7 of the NIH Grants Policy Statement) and will be routed for consideration directly to the Grants Management Specialist named in the current award. Although requests for change of grantee organization may be submitted through this FOA, there is no guarantee that an award will be transferred to the new organization.”

Change of Grantee Organization (Type 7 Parent) 139562
Sponsor: US Department of Health and Human Services; NIH
Deadline: unspecified
“The NIH grantee organizations holding specific types of NIH grants, listed in the full FOA, that applications for change of grantee organization may be submitted in response to this FOA. This assumes such a change is programmatically permitted for the particular grant. Applications for change of grantee organization are considered prior approval requests and will be routed for consideration directly to the Grants Management Specialist named in the current award.”

Clinical Investigator Award
Sponsor: Society of Surgical Oncology
Deadline: January 12, 2015
“The purpose of this award is to promote patient oriented research conducted by surgical oncologists in clinical and translational science. In 2007, SSO established the Clinical Investigator Award Program with the goal of promoting post-fellowship, patient-oriented research through the training of surgical oncologists in clinical and translational science.”

Clinical Patient Care Research Grant
Sponsor: American Lung Association
Deadline: December 15, 2014
“The objective of this grant is to provide seed monies for junior investigators working on traditional clinical studies examining methods of improving patient care and/or treatment for lung disease.”

Clinical Studies of Safety and Effectiveness of Orphan Products Research Project Grant (R01)
Sponsor: US FDA; Office of Orphan Products Development
Deadline: February 4, 2015
“The goal of FDA's OPD grant program is to support the clinical development of products for use in rare diseases or conditions where no current therapy exists or where the product being developed will be superior to the existing therapy. FDA provides grants for clinical studies on safety and/or effectiveness that will either result in, or substantially contribute to, market approval of these products. Applicants must include in the application's Background and Significance section documentation to support the assertion that the orphan disease or condition to be studied is a “rare disease or condition” and an explanation of how the proposed study will either help support product approval or provide essential data needed for product development.”

Collaborative Activity Awards
Sponsor: James F. McDonnell Foundation
Deadline: Unspecified
“The Foundation offers Collaborative Activity Awards to initiate interdisciplinary discussions on problems or issues, to help launch interdisciplinary research networks, or to fund communities of researchers/practitioners dedicated to developing new methods, tools, and applications of basic research to applied problems. In each case the focus of the collaborative activity must meet the program guidelines for one of the following program areas: Studying Complex Systems; Mathematical & Complex Systems Approaches for Brain Cancer; Understanding Human Cognition. With the Collaborative Activity Awards, JSMF continues and formalizes a funding mechanism the Foundation has used since 1987. Over the past decade or so, the Foundation has from time to time provided grants to support study panels and research networks. This has proven to be an effective way to encourage cross-disciplinary thinking and research on fundamental questions. Furthermore, these activities have contributed to the development of programs both at the Foundation and at other funding agencies.”
Connie Henke Yarbro Excellence in Cancer Nursing Mentorship Award
Sponsor: Oncology Nursing Society; Oncology Nursing Society Foundation
Deadline: February 1, 2015
“The purpose of the award is to recognize and support excellence in the mentorship of oncology nurses.”

Consortium for the Study of Chronic Pancreatitis, Diabetes and Pancreatic Cancer Clinical Centers (CSCPDPC-CCs) (U01)
Sponsor: US Department of Health and Human Services; NIH
Deadline: March 2, 2015
“This FOA invites U01 applications for the establishment of a clinical consortium, composed of one Coordination and Data Management Center (CDMC) and up to 9 Clinical Centers (CC), to conduct studies on chronic pancreatitis (CP) and factors that increase the risk of pancreatic cancer in patients (children and adults) with CP, pancreatogenic (type 3c) diabetes (T3cDM) and in patients with newly diagnosed diabetes. The Consortium will form multi-disciplinary teams composed of members from the CCs and CDMC to undertake a comprehensive clinical, epidemiological and biological characterization of patients with CP (including those with Acute Recurrent Pancreatitis, ARP) to gain insight into the pathophysiology of chronic pancreatitis and its sequela: chronic pain, pancreatic insufficiency, T3cDM and the diabetes/pancreatic cancer association. The teams will also undertake studies on the development of pancreatic cancer in newly diagnosed diabetic patients. Applications for the Consortium Coordination and Data Management Center (CDMC) are being solicited via RFA-DK-14-028 "Consortium for the Study of Chronic Pancreatitis, Diabetes and Pancreatic Cancer Coordination and Data Coordinating Center (CSCPDPC-CDMC) (U01)". To achieve the goal of a comprehensive characterization of evolving chronic pancreatitis and pancreatic cancer, each CC should include researchers and clinicians with multi-disciplinary expertise. Research CCs will be expected to share results freely within Consortium and to develop trans-Consortium collaborative projects that make use of the combined expertise and technological capabilities present in all of the CCs. In addition, a major collaborative effort within the Consortium will be the establishment of an annotated repository of biospecimens (blood, pancreatic and duodenal juice, stools and when feasible pancreatic tissue) to allow for the identification and validation of biomarkers for risk stratification and/or early detection.

Consortium for the Study of Chronic Pancreatitis, Diabetes and Pancreatic Cancer Coordination and Data Management Center (CSCPDPC-CDMC) (U01)
Sponsor: US Department of Health and Human Services; NIH
Deadline: March 2, 2015
“This FOA invites U01 applications for the establishment of a clinical consortium, composed of one CDMC and up to 9 CC, to conduct studies on chronic pancreatitis (CP) and factors that increase the risk of pancreatic cancer in patients (children and adults) with CP, pancreatogenic (type 3c) diabetes (T3cDM) and in patients with newly diagnosed diabetes. The Consortium will form multi-disciplinary teams composed of members from the CCs and CDMC to undertake a comprehensive clinical, epidemiological and biological characterization of patients with CP (including those with Acute Recurrent Pancreatitis, ARP) to gain insight into the pathophysiology of chronic pancreatitis and its sequela: chronic pain, pancreatic insufficiency, T3cDM and the diabetes/pancreatic cancer association. The teams will also undertake studies on the development of pancreatic cancer in newly diagnosed diabetic patients. To achieve the goal of a comprehensive characterization of evolving chronic pancreatitis and pancreatic cancer, the Coordinating and Data Management Center (CDMC) will take on the administrative and data collection/analysis functions and will be responsible for the conduct of all of the ongoing and future studies of the CCs. In addition, a major collaborative effort within the Consortium will be the establishment of an annotated repository of bio-specimens (blood, pancreatic and duodenal juice, stools and when feasible pancreatic tissue) to allow for the identification and validation of biomarkers for risk stratification and/or early detection.”

Coordinating Center for the Breast Cancer and the Environment Research Program (U01)
Sponsor: NIH; National Institute of Environmental Health Sciences; NCI
Deadline: LOI December 28, 2014
“The overarching goal of the Breast Cancer and the Environment Research Program (BCERP) is to support integrated scientific research to enhance our understanding of environmental and genetic factors underlying breast cancer risk.
This funding opportunity will support a Coordinating Center, which together with a group of individual transdisciplinary projects investigating the influence of environmental exposures during specific time windows on breast cancer risk, will form the BCERP Consortium. The BCERP Coordinating Center will provide intellectual leadership as well as logistic support for the BCERP Consortium. A primary role of the BCERP Coordinating Center will be to identify opportunities for cross-BCERP collaborations and extend the transdisciplinary activities of the BCERP Consortium. The Coordinating Center will also assist in disseminating BCERP research findings and facilitating an internal evaluation of the Consortium.”


Damon Runyon Physician-Scientist Training Award
Sponsor: Damon Runyon Cancer Research Foundation; Cancer Research Fund
Deadline: December 1, 2014
“The Foundation is establishing a pilot program designed to recruit outstanding U.S. Specialty Board-eligible physicians into cancer research careers by providing them with the opportunity for a protected research training experience under the mentorship of a highly qualified and gifted mentor after they have completed all of their cancer clinical training. The goals are to (a) transform these individuals into the highest quality physician-scientists, capable of conducting research that has the potential to transform the diagnosis, treatment and/or prevention of cancer and (b) to eliminate the financial disincentive to entering this career path. This award will provide a funding source that will enable these individuals to pursue research intensively (at least 80% effort) for up to four years, while, if they wish to maintain their clinical skills, continuing to be clinically active (no more than 20% effort). With the recognition that very few other funding sources (if any) exist to support these developing physician-scientists, this award is structured to provide recipients with significant salary support and necessary research expenses, with the expectation that their institutions will provide an environment and additional support (such as benefits and institutional overhead) to ensure their success. In addition, the Foundation will retire a portion of any medical school debt still owed by an award recipient. The primary criteria used to evaluate applicants are: The quality of the applicant, his/her commitment to pursuing a research career and potential to excel in cancer research. The capacity of the Mentor to provide a robust training experience that will accelerate the development of the applicant's scientific skills and prepare him/her to independently conduct high quality, innovative cancer-related research; the quality of a formal research proposal written by the applicant in a process that is overseen by her/his mentor (importance of the problem, originality and feasibility of the proposed approach, appropriateness of technical aspects of the research plan, and clarity of presentation); The commitment of the institution to the development and training of future physician-scientists, including providing the necessary protected time for research; The importance of the proposed research to the understanding of cancer and/or prevention, diagnosis or treatment of cancer.”


Development and Translation of Medical Technologies to Reduce Health Disparities (SBIR) (R43/R44)
Sponsor: NIH, National Institute of Biomedical Imaging and Bioengineering; NIMHHD
Deadline: LOI December 28, 2014
“The purpose of this funding opportunity is to reduce health disparities through the development and translation of appropriate medical technologies. The NIH defines health disparities as differences in the incidence, prevalence, morbidity, mortality, and burden of diseases and other adverse health outcomes that exist among specific population groups. These population groups include racial and ethnic minorities, socioeconomically disadvantaged individuals, and medically underserved populations including individuals residing in rural and urban areas. Appropriate medical technologies must have the following basic characteristics: effective, affordable, culturally acceptable, and easily accessible to those who need them. Responsive grant applications must involve a formal collaboration with a healthcare provider or other healthcare organization serving one or more health disparity populations during Phase I and Phase II. This announcement supports applications to develop medical devices, imaging systems, and other technologies that adequately address the healthcare needs of health disparity populations. It is expected that responsive grant applications will result in advances in medical technologies that will be invaluable in reducing health disparities within and across the priority areas of cardiovascular disease, stroke, cancer, diabetes, HIV/AIDS, infant mortality, mental health, and obesity, as well as lung, liver, and kidney diseases, psoriasis, scleroderma, and other diseases, illnesses, and conditions of public health importance.”

Early Career Development Grants
Sponsor: Pediatric Brain Tumor Foundation
Deadline: November 17, 2014

“Guided by our strategic plan and input from our Research Advisory Network, the PBTF is launching an Early Career Development grants program. The goal is to support talented researchers in the field of pediatric brain tumors who are in the first five years of their first faculty position. The expectation is that this funding will facilitate grantees’ transition to becoming fully independent investigators. The grants will be based on the merits of the: Mentorship and research environment; Researcher’s productivity and career plan; Proposed research project. The research proposed for funding must focus on pediatric brain tumor(s). Projects may be discovery-oriented, translational or epidemiological in nature. Research proposals of interest to the PBTF will likely generate findings instrumental to advancing the field and in one or more of the following clinical areas: Etiology; Diagnosis and/or prognosis; Current standard of care; Treatment options; Treatment planning (matching drugs to molecularly defined tumor subtypes); Evaluating response to treatment; Early detection of recurrent tumor/monitoring disease status; Health-related quality of life.”


The Early Detection Research Network: Biomarker Developmental Laboratories (U01)
Sponsor: NIH; NCI
Deadline: LOI December 6, 2014

“The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications for Biomarker Developmental Laboratories (BDLs), one of the four scientific units of the Early Detection Research Network (EDRN). The EDRN is a national infrastructure funded to discover, develop, and validate biomarkers for risk assessment, detection, and molecular diagnosis and prognosis of early cancer. The proposed BDLs will be responsible for the discovery, development, characterization, and testing of new, or the refinement of existing, biomarkers and biomarker assays for risk assessment, detection, and molecular diagnosis and prognosis of early cancer. The other three scientific units of the continuing EDRN program are: the Biomarker Reference Laboratories (BRLs), which will serve as Network resources for clinical and laboratory validation of biomarkers; the Clinical Validation Centers (CVCs), which will conduct clinical research on the validation of biomarkers and will serve as resource centers for the EDRN by participating in collaborative biomarker validation studies with EDRN BDLs and BRLs; and the Data Management and Coordinating Center (DMCC), which will support statistical and computational analyses, informatics infrastructure, study design, coordination and support of EDRN-sponsored biomarker validation studies, and the coordination of Network-wide meetings and conferences.”


The Early Detection Research Network: Biomarker Reference Laboratories (U24)
Sponsor: NIH; NCI
Deadline: LOI December 6, 2014

“The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications for Biomarker Reference Laboratories (BRLs), one of the four scientific units of the Early Detection Research Network (EDRN). The EDRN is a national infrastructure funded to discover, develop, and validate biomarkers for risk assessment, detection, and molecular diagnosis and prognosis of early cancer. The proposed BRLs will conduct biomarker assay development and refinement for validation studies, and will serve as a Network resource for laboratory and clinical validation of biomarkers. The other three scientific units of the continuing EDRN program are: the Biomarker Reference Laboratories (BRLs), which will be responsible for the development and characterization of new, or the refinement of existing, biomarkers and biomarker assays for risk assessment, detection, and molecular diagnosis and prognosis of early cancer; the Clinical Validation Centers (CVCs), which will conduct clinical research on the validation of biomarkers and will serve as resource centers for the EDRN by participating in collaborative biomarker validation studies with EDRN BDLs and BRLs; and the Data Management and Coordinating Center (DMCC), which will support statistical and computational analyses, informatics infrastructure, study design, coordination and support of EDRN-sponsored biomarker validation studies, and the coordination of Network-wide meetings and conferences.”

The Early Detection Research Network: Clinical Validation Centers (U01)
Sponsor: NIH; NCI
Deadline: LOI December 6, 2014
“The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications for Clinical Validation Centers (CVCs), one of the four scientific units of the Early Detection Research Network (EDRN). The EDRN is a national infrastructure funded to discover, develop, and validate biomarkers for risk assessment, detection, and molecular diagnosis and prognosis of early cancer. The proposed CVCs will be responsible for clinical research on the validation of biomarkers. CVCs will also serve as clinical resource centers for the EDRN by participating in collaborative biomarker validation studies and collaborating with the other scientific units of the EDRN. The other three scientific components of the continuing EDRN program are: the Biomarker Developmental Laboratories (BDLs), which will be responsible for the development and characterization of new, or the refinement of existing, biomarkers and biomarker assays for risk assessment, detection, and molecular diagnosis and prognosis of early cancer; the Biomarker Reference Laboratories (BRLs), which will serve as Network resources for clinical and laboratory validation of biomarkers; and the Data Management and Coordinating Center (DMCC), which will support statistical and computational analyses, informatics infrastructure, study design, coordination and support of EDRN-sponsored biomarker validation studies, and the coordination of Network-wide meetings and conferences.”

The Early Detection Research Network: Data Management and Coordinating Center (U24)
Sponsor: NIH; NCI
Deadline: LOI December 6, 2014
“The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications for a Data Management and Coordinating Center (DMCC), one of the four scientific units of the Early Detection Research Network (EDRN). The EDRN is a national infrastructure funded to discover, develop, and validate biomarkers for risk assessment, detection, and molecular diagnosis and prognosis of early cancer. The proposed DMCC will be responsible for the following activities: 1) Network Coordination, 2) Data Management and Study Protocol Development, 3) Validation Study Infrastructure and Services, and 4) EDRN Core Fund Management. The other three scientific units of the continuing EDRN program are: the Biomarker Developmental Laboratories (BDLs), which will be responsible for the development and characterization of new, or the refinement of existing, biomarkers and biomarker assays; the Biomarker Reference Laboratories (BRLs), which will serve as Network resources for clinical and laboratory validation of biomarkers; and the Clinical Validation Centers (CVCs), which will conduct clinical research on the validation of biomarkers and will serve as clinical resource centers for the EDRN by participating in collaborative biomarker validation studies with EDRN BDLs and BRLs.

Early-Stage Development of Informatics Technology (U01)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: November 18, 2014
“The purpose of this Funding Opportunity Announcement (FOA) is to invite Cooperative Agreement (U01) applications for the development of enabling informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge in cancer research. As a component of the NCI’s Informatics Technology for Cancer Research (ITCR) Initiative, this FOA focuses on early-stage development from prototyping to hardening and adaptation. The central mission of the ITCR is to promote research-driven informatics technology development. In order to be successful, proposed development plans must have a clear rationale on why the proposed technology is needed and how it will benefit the cancer research community. In addition, mechanisms to solicit feedback from users and collaborators throughout the development process should be included. Applications that focus on data processing and analysis or mathematical/statistical modeling alone without new technology development are not appropriate for this FOA. The scope of this FOA is limited to informatics technology development. Some examples of the utility of informatics technologies that may be addressed in response to this FOA include the following:
1. Technology for automation in experiment design and execution
2. Technology for automation in data collection
3. Technology for data processing and analysis
4. Technology for data quality assessment
5. Technology for data integration
6. Technology for data presentation and visualization
7. Technology for text mining and natural language processing
8. Technology to advance data compression, storage, organization, and transmission
9. Establishing data exchange formats and/or common data elements
10. Improving software interoperability and compatibility
11. Adapting computational tools for translational, epidemiological, and clinical applications
12. Patient-centric laboratory and clinical data coalescence
13. Computer-assisted interpretation of experimental results
14. Environment for interactive modeling and simulation
15. Computational platform for research collaboration
16. Technology for performance evaluation of software tools, algorithms, and data collection methods
17. Computational tools for interdisciplinary research training


**Environmental Influences During Windows of Susceptibility in Breast Cancer Risk (U01)**

**Sponsor:** NIH; National Institute of Environmental Sciences; NCI

**Deadline:** LOI December 28, 2014

“The overarching goal of the Breast Cancer and the Environment Research Program (BCERP) is to support integrated scientific research to enhance our knowledge of environmental and genetic factors underlying breast cancer risk. This funding opportunity will support transdisciplinary research projects to investigate the influence of environmental exposures during specific time windows of susceptibility on breast cancer risk. Applicants must propose transdisciplinary research project that addresses one or more potential windows of susceptibility and facilitates the integration of experimental model and human studies to accelerate understanding of the contribution of environmental factors to breast cancer risk, the underlying mechanisms, and potential prevention strategies. Applications must also include community-academic partnerships with defined community engagement activities.


**Epidemiology Grants**

**Sponsor:** Alex’s Lemonade Stand Foundation for Childhood Cancer

**Deadline:** December 15, 2014

“These awards are expected to provide funds that will support investigators pursuing epidemiological research aimed at improving our understanding of childhood cancer. This grant mechanism is designed to support the research that focuses on the epidemiology, early detection or prevention of childhood cancer; or comparative effectiveness and outcomes research related to detection, prevention and treatment. Eligible areas of investigation using an epidemiological approach include the following: 1. Epidemiology and etiology of childhood cancer (identify subgroups at risk, cause and risk factors); 2. Early Detection of childhood cancer (reduce disease severity and complications e.g. screening); 3. Prevention of childhood cancer (prevent initial development of disease, e.g. immunization, reduce exposure); 4. Comparative effectiveness and outcomes research (evaluate existing or new preventative/therapeutic measures to improve health outcomes for children with cancer or evaluate access to treatment); 5. Molecular epidemiology studies (identify contribution of potential genetic risk factors to late effects of treatment, within families and across populations) Proposals addressing psychosocial aspects of childhood cancer will not be considered under this mechanism. Applications that do not fall into ALSF's mission and stated purpose of this grant will not be considered. ALSF's mission is (1) to raise money and awareness of childhood cancer causes, primarily research into new treatments and cures; and (2) to encourage and empower others, especially children, to get involved and make a difference for children with cancer.”

Ethical Issues in Research on HIV/AIDS and its Co-Morbidities (R21)
Sponsor: US Department of Health and Human Services; NIH
Deadline: January 7, 2015
“This FOA invites applications addressing ethical issues in research relevant to populations with HIV and associated co-morbidities, and populations at high risk of HIV acquisition. The bioethics projects supported through this program announcement will focus on at least one of the following three goals: 1. Development of the empirical knowledge base for human subjects protection and ethics standards in HIV/AIDS research 2. Development of conceptual bioethics approaches to advance scholarship on difficult ethical challenges in HIV/AIDS research 3. Supporting the integration of bioethics work with ongoing research in HIV/AIDS.”

Friends for an Earlier Breast Cancer Test Medical Research Grants
Sponsor: Friends for an Earlier Breast Cancer Test
Deadline: December 1, 2014
“Friends For An Earlier Breast Cancer Test® is a non-profit organization dedicated to promoting awareness and education and to raising funds for research into earlier detection of breast cancer. The organization is requesting applications for pilot projects that focus on new methods to improve detection of early breast cancer and is especially interested in the development of new techniques in the areas of biological or immunologic methods of early detection. It is hoped that pilot projects will provide preliminary data that leads to applications for more substantial peer-reviewed funding. The proposal should represent a new approach to the area of interest.”

Global Education and Training Initiative (GETI): Yamagiwa-Yoshida memorial International Study Grants (YY)
Sponsor: International Union Against Cancer – Union Internationale Contre le Cancer (UICC)
Deadline: January 15, 2015
“UICC's mission is to unite the cancer community to reduce the global cancer burden, to promote greater equity, and to integrate cancer control into the world health and development agenda. The YY grant provides an important opportunity to advance cancer research through international collaboration. Their purpose is to enable cancer investigators from any country to carry out bilateral research projects abroad which exploit complementary materials or skills, including advanced training in experimental methods or special techniques. The fellowship's objectives are: To initiate, set up or pursue bilateral cancer research projects with collaborating investigators abroad; To exchange and exploit complementary skills and materials; To receive training in advanced experimental research methods and techniques. The applicant must be engaged in an area of cancer research listed below:

1. Biology : Research included in this category looks at the biology of how cancer starts and progresses as well as normal biology relevant to these processes

2. Etiology : Research included in this category aims to identify the causes or origins of cancer - genetic, environmental, and lifestyle, and the interactions between these factors

3. Prevention : Research included in this category looks at identifying interventions which reduce cancer risk by reducing exposure to cancer risks and increasing protective factors. Interventions may target lifestyle or may involve drugs or vaccines

4. Early Detection, Diagnosis, and Prognosis : Research included in this category focuses on identifying and testing cancer markers and imaging methods that are helpful in detecting and/or diagnosing cancer as well as predicting the outcome or chance of recurrence

5. Treatment : Research included in this category focuses on identifying and testing treatments administered locally (such as radiotherapy and surgery) and systemically (treatments like chemotherapy which are administered throughout the body) as well as non-traditional (complementary/alternative) treatments (such as supplements, herbs). Research into the prevention of recurrence is also included here.
6. Cancer Control, Survivorship, and Outcomes Research
Research included in this category includes a broad range of areas: patient care and pain management; tracking cancer cases in the population; beliefs and attitudes that affect behaviour regarding cancer control; ethics, education and communication approaches for patients and health care professionals; supportive and end-of-life care; and health care delivery in terms of quality and cost effectiveness.

7. Scientific Model Systems
Research included in this category looks at the development of new animal models, cell cultures and computer simulations and their application to other studies across the spectrum of cancer research. The research plan must consist of basic, translational or applied cancer research. Applicants should note that this is not a clinical training fellowship. All Fellowships are conditional on Fellows returning to the home institutes/country at the end of the fellowship period but are not granted for basic training, courses, lectures, meetings, conferences, congresses, etc. or for visiting institutes.”


Global Education and Training Initiative (GETI): International Cancer Technology Transfer Fellowships (ICRETT)
Sponsor: International Union Against Cancer – Union Internationale Contre le Cancer (UICC)
Deadline: Unspecified
“The aim of the UICC ICRETT fellowships is to facilitate rapid international transfer of cancer research and clinical technology, exchange knowledge and enhance skills in basic, clinical, behavioural and epidemiological areas of cancer research cancer control and prevention and to acquire appropriate clinical management, diagnostic and therapeutic expertise for effective application and use in the home organization upon return. Since its inception in 1976, the ICRETT fellowships have contributed to the development of the professional capacity of over 2500 ICRETT Fellows from over 110 countries by facilitating appropriate person-to-person training in specific areas that are relevant to the cancer research, clinical management and other cancer control activities being conducted in the Fellows' home countries. The fellowship objectives are: To facilitate rapid international transfer of cancer research and clinical technology; To exchange knowledge and enhance skills in basic, clinical, behavioural and epidemiological areas of cancer research, and cancer control and prevention; To acquire appropriate clinical management, diagnostic and therapeutic expertise for effective application and use in the home organization upon return. Topics for research training are the following: Cancer prevention and control (including tobacco control); Basic, applied and clinical cancer research; Epidemiology, cancer registration, public education and behavioural sciences. Topics for clinical training are the following: Surgery, radio- and chemotherapy, medical oncology, multidisciplinary cancer care; Clinical trials; Detection and diagnosis ; Prevention-oriented projects are especially encouraged.”


Grants Focusing on Therapeutic Areas
Sponsor: Sanofi; Enzyme Corporation
Deadline: Continuous
“Enzyme distributes grants to those that target efforts in its areas of disease and therapeutic focus: Multiple Sclerosis; Rare Genetic Diseases; Cardiovascular Disease; Thyroid Cancer. In addition to these disease areas, Enzyme may also support unaccredited education programs targeted toward scientists and researchers in the areas of diabetes, renal, immune-mediated diseases, neurobiology, cystic fibrosis, gene therapies, and biomaterials.”


Harold M. Weintraub Graduate Student Award
Sponsor: Fred Hutchinson Cancer Research Center
Deadline: December 12, 2014
“The Fred Hutchinson Cancer Research Center is seeking nominations for outstanding graduate students for the Harold M. Weintraub Graduate Student Award to recognize outstanding achievement during graduate studies in the biological sciences. The award recognizes outstanding achievement during graduate studies in the biological sciences. A selection committee consisting of Hutchinson Center faculty and students will select awardees from among those nominated on the basis of quality, originality, and significance of their work, as well as to represent a diverse range of research topics.”

Harry J. Lloyd Charitable Trust Basic Science Grants
Sponsor: Harry J. Lloyd Charitable Trust
Deadline: Continuous
“These grants are intended to gain new biological insights into melanoma development or progression. Special consideration will be given in two areas: (1) emerging novel concepts that constitute significant innovation and (2) new investigators in the field of melanoma. Because the Lloyd Trust board of trustees believes that all of life is infused with great value, the following ethical guidelines apply to all grants. A. Recipients will use animals in research only when non-animal options are not available and when the use of animals helps answer significant scientific questions. Recipients will make every effort to minimize distress and pain experienced by the animals; B. Recipients will not use embryonic or fetal cell culture tissues systems in any research funded by the Lloyd Trust; C. The use of transgenic animal models in which human genes are inserted into the germ line requires advanced approval by the trust.

Harry J. Lloyd Charitable Trust Career Development Grants
Sponsor: Harry J. Lloyd Charitable Trust
Deadline: December 10, 2014
“These grants are intended to be used for salary support for promising young melanoma investigators (M.D. or Ph.D.). Special consideration will be given in two areas: (1) emerging novel concepts that constitute significant innovation and (2) new investigators in the field of melanoma. Because the Lloyd Trust board of trustees believes that all of life is infused with great value, the following ethical guidelines apply to all grants. A. Recipients will use animals in research only when non-animal options are not available and when the use of animals helps answer significant scientific questions. Recipients will make every effort to minimize distress and pain experienced by the animals; B. Recipients will not use embryonic or fetal cell culture tissues systems in any research funded by the Lloyd Trust; C. The use of transgenic animal models in which human genes are inserted into the germ line requires advanced approval by the trust.”

Harry J. Lloyd Charitable Trust Translational Research Grants
Sponsor: Harry J. Lloyd Charitable Trust
Deadline: Continuous
“These grants are intended to fund clinically important melanoma research. Special consideration will be given in two areas: (1) emerging novel concepts that constitute significant innovation and (2) new investigators in the field of melanoma. Because the Lloyd Trust board of trustees believes that all of life is infused with great value, the following ethical guidelines apply to all grants. A. Recipients will use animals in research only when non-animal options are not available and when the use of animals helps answer significant scientific questions. Recipients will make every effort to minimize distress and pain experienced by the animals; B. Recipients will not use embryonic or fetal cell culture tissues systems in any research funded by the Lloyd Trust; C. The use of transgenic animal models in which human genes are inserted into the germ line requires advanced approval by the trust.

Hearst Foundations Program Grants – Limited Submission
Sponsor: Hearst Foundations
Deadline: Continuous
“The Hearst Foundations support well-established nonprofit organizations that address important issues within its major areas of interest (education, health, culture, and social service), and that primarily serve large demographic or geographic constituencies. Within these areas, the foundations generally provide endowment, program, and capital grant support. Private nonprofits with significant support from the philanthropic community are favored over those financed through government sources. Health - The Hearst Foundations assist leading regional hospitals, medical centers and specialized medical institutions, such as children’s and women’s hospitals. The foundations fund direct medical services that promote wellness, prevention and rehabilitation. Areas of interest include: cancer, geriatrics, neonatology, perinatology, pediatrics, women’s health, and the disabled. Support for advanced professional education and training is also considered in these fields. In response to the ongoing nursing shortage, the foundations also fund nursing programs designed to enhance skills and increase the number of practitioners and educators in this field.”
Health Policy Scholarship: ACS and ABSrS Health Policy Scholarship
Sponsor: American College of Surgeons
Deadline: February 2, 2015
“The ACS and the American Society of Breast Surgeons (ASBrS) are offering an annual scholarship to subsidize attendance and participation in the Executive Leadership Program in Health Policy and Management at Brandeis University. The course takes place May 31-June 6, 2015. The award is in the amount of $8,000, to be used toward the cost of tuition, travel, housing, and subsistence during the period of the course. The award is to be used to support the recipient during the period of the scholarship. Indirect costs are not paid to the recipient or to the recipient's institution. The scholarship must be used in the year for which it is designated.”

Health Policy Scholarship: ACS and the ASCRS Health Policy Scholarship
Sponsor: American College of Surgeons
Deadline: February 2, 2015
“The ACS and the American Society of Colon and Rectal Surgeons (ASCRS) are offering an annual scholarship to subsidize attendance and participation in the Executive Leadership Program in Health Policy and Management at Brandeis University. The course takes place May 31-June 6, 2015. The award is in the amount of $8,000, to be used toward the cost of tuition, travel, housing, and subsistence during the period of the course. The award is to be used to support the recipient during the period of the scholarship. Indirect costs are not paid to the recipient or to the recipient's institution. The scholarship must be used in the year for which it is designated.”

High Throughput Screening (HTS) to Discover Chemical Probes (R21)
Sponsor: US Department of Health and Human Services, NIH
Deadline: January 7, 2015
“This FOA encourages investigators to form collaborations with an established academic, nonprofit, or commercial high throughput screening (HTS) facility that has the requisite expertise and experience to implement HTS-ready assays for the discovery and development of small molecule chemical probes. Through this FOA, NIH wishes to stimulate research in 1) discovery and development of novel, small molecules for their potential use in studying disease treatments relevant to the missions of the participating NIH Institutes, and 2) discovery and/or validation of novel, biological targets that will inform studies of disease mechanisms. Emphasis will be placed on projects that provide new insight into important disease targets and processes.”

Improving Diet and Physical Activity Assessment (R21)
Sponsor: US Department of Health and Human Services; NIH
Deadline: February 16, 2015
“This FOA encourages innovative research to enhance the quality of measurements of dietary intake and physical activity. Applications submitted under this FOA may include development of: Novel assessment approaches; better methods to evaluate instruments; assessment tools for culturally diverse populations or various age groups, including children and older adults; improved technology or applications of existing technology; statistical methods to assess or correct for measurement errors or biases, methods to investigate the multidimensionality of diet and physical activity behavior through pattern analysis; or integrated measurement of diet and physical activity along with the environmental context of such behaviors.

Innovations for Health Living – Improving Minority Health and Eliminating Health Disparities (R43)
Sponsor: NIH; National Institute on Minority Health and Health Disparities
Deadline: LOI December 27, 2014
“NIMHD is committed to supporting a wide range of research aimed at the development of innovative diagnostics, treatments, and preventative strategies and making these products available and accessible to those individuals and communities bearing disproportionate burdens of illness. Technologies to address the unique challenges encountered in rural areas are of particular interest. Technologies to be developed may be new and innovative or they may arise from existing technologies that by redesign create increased and more attractive opportunities for health disparity populations to experience better health, improve their current health, and to maintain a long and healthy lifestyle.”
Empowering technologies are attractive, accessible easy to use, adoptable, and sustainable. To be effective, a technology must provide users improvements in health status and well-being relative to their current health status and well-being. The technology should be reliable, robust, and have reproducible outcomes. Ideally, the proposed technology should improve health through increased opportunities for enhanced access to:

- Healthcare institutions and providers, including those in geographically remote or physically difficult to access locations;
- New or increased patient populations especially, those located in geographically remote or physically difficult to access locations;
- Medical and health knowledge through increased opportunities for individuals with limited English proficiency or low health or media literacy;
- Diverse providers, including specialists, appropriately resourced small or large centers with access to advanced medical technologies;
- Expanded adequate financial resources including free and/or affordable and sustainable insurance coverage;
- Healthcare delivered in culturally and acceptable and respectful manners and in safe environments; and
- Quality healthcare appropriately priced for diverse providers, hospitals, and patients.

Technologies that might achieve the objectives of this initiative include but are not limited to:

- Innovative products or services that facilitate or enhance care coordination between primary care providers, hospital emergency department staff, specialty physicians, nurse practitioners, providers of mental health and behavioral health services, patient navigators, etc., in medically underserved communities and regions.
- Culturally attuned behavioral interventions or low-cost tools and technologies (e.g. software apps for mobile devices) that empower and promote opportunities for individuals and communities to engage in health-seeking behaviors (diet choice, exercise/physical activity, oral hygiene, medication adherence, child immunizations, etc.) and to avoid risky behaviors (smoking, alcohol/drug misuse, unsafe sex, etc.)
- Tools, technologies, and methods for detecting, measuring, and assessing a broad array of unhealthy social and environmental exposures (stress, pollutants, allergens, noise, crime, etc.), and for characterizing cumulative exposures to these environments (exposomes) for individuals and communities and linking this information to physiological responses and health indicators at the individual and population levels. These technologies may include efforts to improve data collection and data integration across disparate data sources, including clinical patient data, public health data, census data, housing data, employment data, crime statistics, etc.
- Products or services that expand opportunities to access and utilize high-quality prenatal care and thereby reduce the frequency of high-risk pregnancies in health disparities populations.
- Products or services that engage, empower, and motivate individuals and communities to enhance the quality of life and reduce health disparities among people with disabilities.
- Culturally appropriate survey instruments, tools, modules and databases to promote community-based research engaging racial/ethnic minorities, rural and other medically underserved communities.
- Culturally appropriate, evidence-based health empowering promotion and disease prevention educational media such as software, informational videos, printed materials for health disparities populations and disadvantaged communities.
- Innovative software, tools and technology for Science and Health Education such as curriculum materials, interactive teaching aids, models for classroom instruction for K-12 and undergraduate students and the general public.
- Mobile health (mHealth) and telehealth/telemedicine technologies and apps for communication, diagnosis.


### International Agency for Research on Cancer (IARC) Monographs Program (U01) (Limited Submission)

**Sponsor:** NIH; NCI  
**Deadline:** December 18, 2014

“This limited competition Funding Opportunity Announcement (FOA) solicits the renewal application for the International Agency for Research on Cancer (IARC) Monographs on the Evaluation of Carcinogenic Risks to Humans. The IARC Monographs program, which is supported in large part by the NCI, critically evaluates the published scientific evidence on carcinogenic hazards to humans. Monograph volumes are considered critical references that inform health policy and cancer research worldwide about carcinogenic risks to reduce cancer burden globally.”

**International Development and Education Award (IDEA)**
Sponsor: American Society of Clinical Oncology, Conquer Cancer Foundation
Deadline: January 7, 2015
“The IDEA provides support for early-career oncologists in developing countries and facilitates the sharing of knowledge between these oncologists and ASCO members. The program pairs IDEA Recipients with a leading ASCO member "Mentor," and enables Recipients to attend the ASCO Annual Meeting, participate in a post-Meeting visit to their Mentor's institution, and develop long-term relationships to improve cancer care in their countries and inform ASCO programs in developing countries.”


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**International Waldenstrom’s Macroglobulinemia Foundation (IWMF) Research Grants**
Sponsor: International Waldenstrom’s Macroglobulinemia Foundation
Deadline: Continuous
“The IWMF Research Grant Program is pledged to promote and support basic research leading to improved understanding of the cause, diagnosis, treatment and cure for the disease, Waldenstrom’s macroglobulinemia. Waldenstrom’s macroglobulinemia is a rare, chronic cancer that is classified as a plasma cell neoplasm. It affects plasma cells, which develop from white blood cells called B-lymphocytes, or B cells.


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**Interpreting Variation in Human Non-Coding Genomic Regions Using Computational Approaches and Experimental Assessment (R01)**
Sponsor: US Department of Health and Human Services; NIH
Deadline: December 21, 2014
“This FOA solicits applications to develop highly innovative computational approaches for interpreting sequence variants in the non-protein-coding regions of the human genome. The goal is to develop methods that analyze whole-genome sequence data by integrating data sets, such as ones on genome function, phenotypes, patterns of variation, and other features, to identify or substantially narrow the set of variants that are candidates for affecting organismal function leading to disease risk or other traits. The accuracy of the computational approaches developed should be assessed using experimental data. The scale of analysis should be genome-wide interpretation of the variants that may contribute to the trait or disease being studied, rather than variants found in a particular gene, gene family, or chromosome region. The initial approaches should start with the entire genome and narrow the focus to sets of regions for more analysis, such as by using data from whole-genome sequencing studies, GWAS studies, or scans for natural selection. (The focus is on interpreting germline variants; somatic mutations, e.g., in tumors, raise issues such as heterogeneity that are important but not the focus of this FOA.) Applications may identify one or more organismal traits or diseases to study, such as a human disease, disease resistance, pharmacologic responses, or physiological traits. Any traits or diseases chosen should be well-justified, such as by the potential for generalizable results and data availability. NHGRI solicits applications that investigate any disease or trait. NCI solicits applications for studies focusing on germline variants related to cancer susceptibility. NIDA solicits applications for studies related to drug addiction.”


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**Kimmel Scholar Award**
Sponsor: Sidney Kimmel Foundation for Cancer Research
Deadline: December 3, 2014
“The Sidney Kimmel Foundation for Cancer Research funds the Kimmel Scholars Program, which each year, through a distinguished board of cancer researchers, provides research grants to the nation's most promising young cancer researchers. The goal of the grant program is to improve the basic understanding of cancer biology and to develop new methods for the prevention and treatment of cancer.”

Kimmel Translational Science Award
Sponsor: Sidney Kimmel Foundation for Cancer Research
Deadline: December 3, 2014
“The foundation provides these awards specifically for physicians engaged in translational science. Applicants must demonstrate a significant personal involvement in the laboratory component of the translational project described. The translational research may involve primarily animal studies but must include reasonable application to subsequent human investigation.”  

Kroger Company Foundation Grants
Sponsors: The Kroger Company Foundation
Deadline: unspecified
“The Foundation exists for the betterment of the people and communities where The Kroger Co. has operations. Therefore, only organizations that serve the geographic areas where the company operates are eligible. Here is a quick summary of eligible grant requests: Local United Way campaigns; Local educational organizations, primarily K-12 schools; Local hunger relief organizations; Local breast cancer and women's health initiatives; Local organizations that support and promote the advancement of women and minorities; Local grassroots community organizations; Capital campaigns; start up grants; and funding for special projects.”  

Kure-It – AACR Grant for Kidney Cancer Research
Sponsor: AACR
Deadline: December 2, 2014
“Research projects should advance the basic knowledge of tumor immunology mechanisms, or develop new concepts in the treatment, control, or prevention of kidney cancer by immunology-based therapeutic approaches. Proposed projects may be basic, translational, clinical or epidemiological in nature and must focus on cancer immunology including, but not limited to: immune recognition, regulation, tumor escape, and therapeutic manipulation for kidney cancer. Proposals will be accepted for new ideas and approaches with an immunological basis directly relevant and applicable to kidney cancer. Proposed research projects may be basic, clinical, translational, or epidemiological in nature and must focus on cancer immunology including, but not limited to: immune recognition, regulation, tumor escape, and therapeutic manipulation of kidney cancer.


Landon Foundation – AACR Innovator Award for Cancer Prevention Research
Sponsor: AACR
Deadline: December 9, 2014
“The award was established to recognize the outstanding achievement of a junior faculty-level scientist working in the field of cancer prevention, and support his or her novel and innovative research that, if successful, will have the potential for high impact in the cancer prevention field. The goal of the grant program is to encourage junior faculty, who have completed their most recent doctoral degree or medical residency within the past 11 years at the start of the grant term, to pursue novel, high-risk, high-reward cancer prevention research. Travel support is included to help foster interactions and collaborations among cancer scientists studying various aspects of cancer biology and to disseminate scientific knowledge about cancer prevention research within the field. Proposed projects may differ from current accepted practice and break new ground or extend previous findings in new directions and therefore, may not be supported by substantial preliminary data. Accordingly, such projects will be evaluated based on the conceptual framework, the level of innovation, and the potential for high reward. The research proposed for funding may be basic, translational, clinical or epidemiological in nature and can be in any discipline of cancer prevention research.”  

Lila and Murray Gruber Memorial Cancer Research Award and Lectureship
Sponsor: American Academy of Dermatology
Deadline: February 25, 2015
“The award will be made in recognition of the investigator's lifetime achievements in the field of cancer research. Its purpose is to encourage participation in cancer research and to provide a forum for the enrichment of knowledge of dermatologists in this important scientific field.”  

Limited Submission: AIDS Malignancy Consortium (UM1)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: January 6, 2015
“The purpose of this limited competition FOA is to continue support of the research activities of the AIDS Malignancy Consortium which are: 1) design, development, and evaluation of clinical interventions for the prevention and treatment of malignancies in patients with HIV infection; 2) development of more effective management and therapeutics for HIV-associated malignancies; 3) investigation of the biology of HIV malignancies within the context of clinical trials; 4) management of issues of international importance in HIV-associated-malignancies; and 5) distribution of excess tumor tissue and other relevant biologic fluids to the AIDS and Cancer Specimen Resource for ongoing or future investigations. In addition, the AMC is expected to continue the development and execution of the "ANCHOR" study on the treatment of anal cancer high-grade squamous intraepithelial lesions (HSIL) to reduce anal cancer. In the current funding period, the initiation of the ANCHOR study was supported through supplemental funding to AMC. The Consortium will consist of a coordinating center, clinical trials sites, network laboratories, and a statistical center. The Consortium will have at least four scientific disease-oriented Working Groups (WGs): 1) Kaposi sarcoma WG; 2) lymphoma WG; 3) WG for human papilloma virus-associated cancers; and 4) WG for non-AIDS-Defining Cancers.”

Lotte and John Hecht Memorial Foundation Project Funding
Sponsor: John and Lotte Hecht Memorial Foundation
Deadline: Continuous
“The Foundation has two major objectives: Investigation and support of complementary and alternative medicine, particularly in the treatment of cancer; Economic education that promotes the principles of a free market. The foundation also supplies support to organizations that help people who fall through the social safety net of government programs for the needy. Most of these groups operate around the area of Main and Hastings in Vancouver and care for that very needy population. Some support is also given to existing charitable organizations that come to the board’s attention. Funding for capital projects, endowments, scholarships, or bursaries is not available.”

Medical Education Grants
Sponsor: Boehringer Ingelheim Pharma GmbH & Co. KG/Boehringer Ingelheim Pharmaceuticals, Inc. (BIPI)
Deadline: None specified
“The sponsor is proud to provide support for specific independent educational activities for healthcare providers and patients that may translate to better management of disease and improvement in patient safety and population health. An independent educational program may be at the national, regional or local level and may include but is not limited to, live and interactive didactic presentations (e.g., symposia at major educational meetings, grand rounds, regional workshops), web-based programs, print and electronic monographs and other innovative educational formats. The sponsor considers funding of activities in many therapeutic areas including: Therapeutic Areas Cardiovascular Disease - Stroke Prevention in Atrial Fibrillation; Cardiovascular Disease - Venous Thromboembolism (VTE); Endocrine Disease – Diabetes; General Pharmacy - Pharmacy Practices; Immunology - General Immunology; Oncology - Acute Myeloid Leukemia (AML); Oncology - Lung Cancer; Oncology - Head and Neck Cancer; Respiratory Disease – Asthma; Respiratory Disease – COPD; Respiratory Disease - Idiopathic Pulmonary Fibrosis (IPF) The Medical Education Grants Department consists of education professionals who facilitate lifelong learning for clinicians and patients through support of independent education. The grants department is committed to supporting innovative, high quality, independent medical education and research for healthcare professionals and patients that resolves unmet medical needs, fosters clinical excellence, and measurably improves health outcomes in areas of strategic focus to the sponsor.”

Melanoma Research Alliance Awards for Teams
Sponsor: Melanoma Research Alliance
Deadline: November 21, 2014
“MRA announces its eighth annual RFP, soliciting translational research grant applications. The RFP calls for ideas that could lead to high impact near-term clinical application in melanoma detection, prevention, diagnosis, staging, or treatment. Awards for team science are designed to foster a collaborative research process and promote transformational melanoma research advances with the potential for rapid clinical translation. Special Opportunity: Bristol-Myers Squibb-MRA Team Science Awards in Immuno therapy:
Through the support of Bristol-Myers Squibb (BMS), MRA is offering awards for multidisciplinary teams to conduct projects with the potential to lead to transformative advances in melanoma immunotherapies. This is not an Academic-Industry Partnership mechanism; applicants do not need to contact BMS or secure matching support from BMS for this opportunity.

**MRA Team Science Academic-Industry Partnership Awards:**
These awards are designed to facilitate progress via interactions between the academic and industrial research sectors in the team setting, and will be co-funded by MRA and an industrial collaborator. Teams will receive funding from MRA to conduct projects supported by preliminary data.

**Special Emphasis Areas:**
For the 2014-2015 cycle, proposals in the following areas are of particular interest and will receive special consideration. These can include pre-clinical, clinical, and/or correlative scientific studies:

1. **Early stage melanoma biomarkers:** Identifying biomarkers of risk and markers of long term outcomes for improved clinical management and to speed the development of adjuvant therapies for patients with Stage I - III melanoma.
2. **Treatment-related biomarkers:** Identifying biomarkers predictive of clinical outcomes of treatment regimens, both approved and investigational, which may include studies of the tumor microenvironment, invasion, and metastasis and the study of 'exceptional cases.' Investigational studies of mechanisms underlying treatment-related side effects are also of interest.
3. **Combination therapies:** Undertaking studies that define logical and optimal combination therapies to improve outcomes and curtail resistance to current and emerging therapies.
4. **New targets:** Identifying and characterizing new targets and treatment modalities for melanomas that are not well-managed by existing or emerging therapies (e.g., brain metastases), including drivers of tumor invasion and metastasis in melanoma broadly and in melanoma sub-types.


**Mentor Fellowship Program**
Sponsor: North American Association of Central Cancer Registries
Deadline: Continuous

“The purpose of the Program is to provide one-on-one, hands-on training in a registry operation to central registry staff (or other comparable work site) with another central registry acting as the mentor. The goal is to provide an opportunity for an in-depth, on-site, and interactive experience in cancer registry operations to strengthen cancer registries and their staff throughout North America. Registry operations appropriate for a fellowship award include any cancer registry procedure related to data collection, data processing, data quality evaluation, or data use.”


**National Cancer Institute Program Project Applications (P01)**
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: January 7, 2015

“With this Funding Opportunity Announcement (FOA), the National Cancer Institute (NCI) invites applications for investigator-initiated program project (P01) grants. Proposed program projects may address any of the broad areas of cancer research, including (but not limited to) cancer biology, cancer prevention, cancer diagnosis, cancer treatment, and cancer control. Basic, translational, clinical, and/or population-based studies in all of these research areas are appropriate. Each Program Project application must consist of at least three projects. The projects must share a common central theme, focus, and/or overall objective.”


**NIH Support for Conferences and Scientific Meetings (Parent R13/U13)**
Sponsor: US Department of Health and Human Services; NIH
Deadline: December 12, 2014

“The purpose of the NIH Research Conference (R13) Grant and NIH Research Conference Cooperative Agreement (U13) Programs is to support high quality conferences that are relevant to the public health and to the scientific mission of the participating Institutes and Centers.”

**Nutrigenics and Nutrigenomics Approaches for Nutrition Research (R01)**

**Sponsor:** US Department of Health and Human Services, NIH  
**Deadline:** March 19, 2015

“The main objective of this Funding Opportunity Announcement (FOA) is to promote application of nutrigenetics and/or nutrigenomics approaches to nutrition research through collaborative interaction among nutrition researchers and experts in omics technologies.”


**Oncology Nursing Society Congress Scholarships**

**Sponsor:** Oncology Nursing Society; Oncology Nursing Society Foundation  
**Deadline:** December 1, 2014

“The purpose of this award is to support a registered nurse interested in improving cancer care by developing their personal knowledge as a result of attending the ONS Congress and sharing this new knowledge with others.”


**Opportunities for Collaborative Research at the NIH Clinical Center (U01)**

**Sponsor:** US Department of Health and Human Services  
**Deadline:** March 20, 2015

“The goal of this program is to support collaborative translational research projects aligned with NIH efforts to enhance the translation of basic biological discoveries into clinical applications that improve health. It encourages high quality science demonstrating the potential to result in understanding an important disease process or lead to new therapeutic interventions, diagnostics, or prevention strategies within the research interests and priorities of the participating NIH Institutes/Centers (ICs). Specifically, the program seeks to broaden and strengthen translational research collaborations between basic and clinical researchers both within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural and extramural investigators, and by providing support for extramural investigators to take advantage of the unique research opportunities available at the NIH Clinical Center by conducting research projects in collaboration with NIH intramural investigators. In order to be eligible for this program, the application must include at least one intramural scientist as Program Director/Principal Investigator or collaborator, and at least some of the research must be conducted at the NIH Clinical Center. Through this collaboration, external researchers may gain access to the NIH Clinical Center and leverage the diverse Clinical Center resources, expertise, and infrastructure available to test promising laboratory- and animal-based discoveries with potential for advancing disease diagnosis, treatment and prevention. The special environment of the Clinical Center can support studies that may not be readily supported elsewhere. The companion FOA (PAR-13-357) encourages X02 pre-applications for Opportunities for Collaborative Research at the NIH Clinical Center. The X02 pre-application is the recommended (not required) first step in the application process for this FOA. Potential applicants should read both FOAs. Investigators whose X02 pre-applications are meritorious, can be supported by the resources of the NIH Clinical Center, and align with the research missions of the participating NIH ICs, will be notified of the opportunity to submit a U01 application to this FOA.”


**Physical Sciences-Oncology Network (PS-ON): Physical Sciences- Oncology Projects (PS- OP) (U01)**

**Sponsor:** US Department of Health and Human Services; NIH  
**Deadline:** LOI January 15, 2014

“This Funding Opportunity Announcement (FOA) invites U01 cooperative agreement applications for Physical Science-Oncology Projects (PS-OP). The goal of the PS-OPs is to foster the convergence of physical sciences approaches and perspectives with cancer research to advance our understanding of cancer biology and oncology by forming small transdisciplinary teams of physical scientists and cancer biologists/physician scientists. Examples of physical scientists may include engineers, physicists, mathematicians, chemists, and computer scientists. The PS-OPs, individually and as a collaborative Network along with other PS-OPs and the Physical Sciences-Oncology Centers (PS-OC), will support transdisciplinary research that: (1) establishes a physical sciences perspective within the cancer research community; (2) facilitates team science and field convergence at the intersection of physical sciences and cancer research; and (3) collectively tests physical sciences-based experimental and theoretical concepts of cancer and promotes innovative solutions to address outstanding questions in cancer research.”

**Pilot Study Program**
Sponsor: Marsha Rivkin Center for Ovarian Cancer Research
Deadline: December 2, 2014

“Funding is often difficult to find for discovery work leading up to the most innovative scientific theories. In order to foster these novel ideas, each year, the Center funds promising pilot studies in ovarian cancer. The discoveries from these studies in turn lay the groundwork for major research initiatives. Data gathered from these studies often allow scientists to in turn further pursue research ideas through highly competitive national government grants necessary to complete these projects. Funding is open to investigator-initiated projects in all areas of ovarian cancer research. In addition, projects designed to analyze data from already funded clinical trials will be considered. Priority for funding will be given to proposals that are: Innovative; Multidisciplinary; Likely to lead to submission of grant applications for independently funded investigations; and/or Have translational research potential”


**Pre-Application: Opportunities for Collaborative Research at the NIH Clinical Center (X02)**
Sponsor: US Department of Health and Human Services; NIH
Deadline: December 10, 2014

“This FOA encourages X02 pre-applications for Opportunities for Collaborative Research at the NIH Clinical Center. Potential applicants should read both FOAs. Investigators whose X02 pre-applications are meritorious, can be supported by the resources of the NIH Clinical Center, and align with the research missions of the participating NIH ICs, will be notified of the opportunity to submit a U01 application under PAR-13-358. The goal of this program is to support collaborative translational research projects aligned with NIH efforts to enhance the translation of basic biological discoveries into clinical applications that improve health. It encourages high quality science demonstrating the potential to result in understanding an important disease process or lead to new therapeutic interventions, diagnostics, or prevention strategies within the research interests and priorities of the participating NIH Institutes/Centers (ICs). Specifically, the program seeks to broaden and strengthen translational research collaborations between basic and clinical researchers both within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural investigators and extramural, and by providing support for extramural investigators to take advantage of the unique research opportunities available at the NIH Clinical Center by conducting research projects in collaboration with NIH intramural investigators. In order to be eligible for this program, the application must include at least one intramural scientist as Program Director/Principal Investigator or collaborator, and at least some of the research must be conducted at the NIH Clinical Center.”


**Process Improvement Program**
Sponsor: North American Association of Central Cancer Registries
Deadline: N/A

“The purpose of the PIP is to award grants to state/provincial agencies, local tumor registrar associations, as well as other groups of cancer registry professionals, to include a Process Improvement Program workshop as one component of an annual meeting. The focus of the workshop must be on enhancing data quality through improved collaboration, more effective communication, and strengthening the relations between state/provincial agencies, local tumor registrar associations, and other groups of cancer registry professionals.”


**Program Grants – Hearst Foundation**
Sponsor: Hearst Foundations
Deadline: Continuous

“The foundations fund direct medical services that promote wellness, prevention and rehabilitation. Areas of interest include - cancer, - geriatrics, - neonatology, - perinatology, - pediatrics, - women's health, and - the disabled. Support for advanced professional education and training is also considered in these fields. In response to the ongoing nursing shortage, the foundations also fund nursing programs designed to enhance skills and increase the number of practitioners and educators in this field.”

Prostate Cancer Research Program: Exploration – Hypothesis Development Award
Sponsor: US Department of Defense; US Army Medical Research and Material Command; Office of Congressionally Directed Medical Research Programs
Deadline: Unspecified
“The Exploration - Hypothesis Development Award supports the exploration of highly innovative, untested, potentially high-gain concepts, theories, paradigms, and/or methods that address an important problem in prostate cancer...This award is designed to provide investigators the opportunity to pursue serendipitous observations that may reveal entirely new avenues for investigation. Presentation of preliminary data is strongly discouraged. However, logical reasoning and a sound scientific rationale for the proposed work must be provided.”

Request for Proposals: Established Investigator Academic-Industry Partnership Awards
Sponsor: Melanoma Research Alliance
Deadline: November 21, 2014
“The MRA is soliciting proposals that address the gap in translational science, i.e., turning scientific discoveries into tools and/or treatments for high risk individuals and melanoma patients. Successful proposals will offer the potential for translational development that could lead to high impact near-term clinical application in melanoma detection, prevention, diagnosis, staging, or treatment. The Established Investigator Awards are designed to facilitate progress via interactions between the academic and industrial research sectors, and will be co-funded by MRA and an industrial collaborator whose involvement is essential to the project. It is the responsibility of the academic scientist to find an industrial partner whose involvement and collaboration will be vital to conducting the research project, or vice versa. MRA welcomes proposals in the following areas: - Prevention: Elucidation of environmental, epidemiological and biological factors in melanoma carcinogenesis. - Diagnosis and Staging: Development of targeted screening methods and identification and validation of diagnostic and prognostic biomarkers. - Treatment: Projects emphasizing the translation of scientific findings to new treatments for patients with melanoma are solicited. Examples include, but are not limited to, studies of melanoma immunotherapy, therapeutic applications based on molecular mechanisms involved in melanoma formation and/or progression, combination therapies, and development of novel biomarkers of response to therapy. Special Emphasis Areas: For the 2014-2015 cycle, proposals in the following areas are of particular interest and will receive special consideration. These can include pre-clinical, clinical, and/or correlative scientific studies: 1. Early stage melanoma biomarkers: Identifying biomarkers of risk and markers of long term outcomes for improved clinical management and to speed the development of adjuvant therapies for patients with Stage I - III melanoma. 2. Treatment-related biomarkers: Identifying biomarkers predictive of clinical outcomes of treatment regimens, both approved and investigational, which may include studies of the tumor microenvironment, invasion, and metastasis and the study of 'exceptional cases.' Investigational studies of mechanisms underlying treatment-related side effects are also of interest. 3. Combination therapies: Undertaking studies that define logical and optimal combination therapies to improve outcomes and curtail resistance to current and emerging therapies. 4. New targets: Identifying and characterizing new targets and treatment modalities for melanomas that are not well-managed by existing or emerging therapies (e.g., brain metastases), including drivers of tumor invasion and metastasis in melanoma broadly and in melanoma sub-types.

Research Grants – Fanconi Anemia Research Fund
Sponsor: Fanconi Anemia Research Fund
Deadline: Continuous
“The Fund has a particular interest in funding interdisciplinary, translational research efforts that effectively address one or more of the following priorities: To study Fanconi anemia genes and their products, and to understand how alteration of those products leads to the clinical manifestations of Fanconi anemia; To define the molecular pathogenesis of cancers that affect Fanconi anemia patients, and to develop strategies to prevent, treat and cure them; To determine the causes of bone marrow failure, myelodysplasia and leukemia in Fanconi anemia patients, and to develop strategies to prevent, treat and cure these disorders; To support the creation of shared resources, databases and technologies for the international Fanconi anemia research community; To identify practical and proactive management strategies that families and patients can use to develop and maintain a high quality of life.”
Research Grants – International Waldenstrom's Macroglobulinemia Foundation (IWMF)
Sponsors: International Waldenstrom's Macroglobulinemia Foundation (IWMF)
Deadline: Unspecified
“The IWMF Research Grant Program is pledged to promote and support basic research leading to improved understanding of the cause, diagnosis, treatment and cure for the disease, Waldenstrom's macroglobulinemia. Waldenstrom's macroglobulinemia is a rare, chronic cancer that is classified as a plasma cell neoplasm. It affects plasma cells, which develop from white blood cells called B-lymphocytes, or B cells.”

Research on Malignancies in the Context of HIV/AIDS (R21)
Sponsor: US Department of Health and Human Services, NIH
Deadline: January 7, 2015
“This FOA encourages R21 applications from institutions/organizations that propose to continue advancing our understanding of the risks, development, progression, diagnosis, and treatment of malignancies observed in individuals with an underlying HIV infection or AIDS. The NCI and NIDCR encourage research in areas such as the study of the etiologic factors, cofactors, immunopathogenesis, diagnosis, and consequences of both non-AIDS defining and AIDS-defining malignancies in diverse populations. This FOA encourages research efforts that will (i) provide information on the clinical outcomes of such cancers in the HIV-infected population and (ii) identify specific contributions resulting from HIV infection and its potential interaction with other pathogens for the development and pathogenesis of these cancers. Ultimately, such efforts could inform screening approaches and therapies targeted to the HIV-infected population.”

Research Supplements to Promote Diversity in Health-Related Research (Admin Supp)
Sponsors: US Dept. of Health and Human Services; NIH
Deadline: Varies; Contact for specific information
“Funds are available for administrative supplements to improve the diversity of the research workforce by supporting and recruiting students, postdoctorates, and eligible investigators from groups that have been shown to be underrepresented in health-related research. This supplement opportunity is also available to PD(s)/PI(s) of research grants who become disabled and need additional support to accommodate their disability in order to continue to work on the research project. Administrative supplements must support work within the scope of the original project.”

Research Supplements to Promote Re-Entry Into Biomedical and Behavioral Research Careers – NCI
Sponsors: US Dept. of Health and Human Services; NIH; NCI
Deadline: Variable
“The Office of Research on Women’s Health (ORWH), NCI, and the Office of Dietary Supplements (ODS) announce the continuation of the program for administrative supplements to research grants to support individuals with high potential to re-enter an active research career after an interruption for family responsibilities or other qualifying circumstances. The purpose of these supplements is to encourage such individuals to re-enter research careers within the missions of all the program areas of NIH. This program will provide administrative supplements to existing NIH research grants for the purpose of supporting full-time or part-time research by these individuals to update their existing research skills and knowledge.”

Revisions for Early-Stage Development of Informatics Technology (U01)
Sponsor: Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: November 18, 2014
“The purpose of this FOA is to invite revisions (formerly called "competing revisions") from currently funded NCI U01 cooperative agreement projects for early-stage development of enabling informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge. As a component of the NCI's Informatics Technology for Cancer Research (ITCR) Initiative, this FOA aims to promote interdisciplinary collaboration in the development of innovative computational methods and informatics approaches that are essential for cancer research on all fronts to accelerate scientific discovery and ultimately translate data into knowledge and clinical practice. Applications that focus on data processing and analysis or mathematical/statistical modeling alone without new technology
development are not appropriate for this FOA. Some examples of the utility of informatics technologies that may be addressed in response to this FOA include, but are not limited to, the following:

1. Software for automation in experiment design and execution
2. Software for automation in data collection
3. Software for data processing and analysis
4. Software for data quality assessment
5. Software for data integration
6. Software for data presentation and visualization
7. Software for text mining and natural language processing
8. Archiving, organization, retrieval, and dissemination of data and knowledge
9. Establishing data exchange formats and/or common data elements
10. Improving software interoperability and compatibility
11. Adapting computational tools for translational, epidemiological, and clinical applications
12. Patient-centric laboratory and clinical data coalescence
13. Computer-assisted interpretation of experimental results
14. Environment for interactive modeling and simulation
15. Computational platform for research collaboration
16. Technology for performance evaluation of software tools, algorithms, and data collection methods
17. Computational tools for interdisciplinary research training


Revisions for Early-Stage Development of Informatics Technology (R01)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: November 18, 2014

“The purpose of this FOA is to encourage revision applications from currently funded NCI R01 and R37 (MERIT) research projects for early-stage development of enabling informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge. As a component of the NCI’s Informatics Technology for Cancer Research (ITCR) Initiative, this FOA aims to promote interdisciplinary collaboration in the development of innovative computational methods and informatics approaches that are essential for cancer research on all fronts to accelerate scientific discovery and ultimately translate data into knowledge and clinical practice. Applications that focus on data processing and analysis or mathematical/statistical modeling alone without new technology development are not appropriate for this FOA.”


Revisions for Early-Stage Development of Informatics Technology (P01)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: November 18, 2014

“The purpose of this Funding FOA is to invite revisions from currently funded NIH P01 program projects for early-stage development of enabling informatics technologies to improve the acquisition, management, analysis, and dissemination of data and knowledge. As a component of the NCI’s Informatics Technology for Cancer Research (ITCR) Initiative, this FOA aims to promote interdisciplinary collaboration in the development of innovative computational methods and informatics approaches that are essential for cancer research on all fronts to accelerate scientific discovery and ultimately translate data into knowledge and clinical practice.”


Revisions to P50 Awards for Research on Detection of Pathogen-Induced Cancer (DPIC) (P50)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: December 11, 2014

“This FOA invites revision applications (formerly called "competing revisions") from currently funded NIH P50 Center. These revision applications are expected to focus on the interactions of carcinogenic pathogens with the human microbiome and the host for the detection of pathogen-induced cancer (DPIC). This FOA encourages research to assess molecular signatures associated with risk and early detection of pathogen-induced cancer and chronic inflammation associated with progression to invasive cancer. Studies proposed in the revision applications must correspond to an additional project expanding the scope of the entire parent P50 award.”

Revisions to P01 Awards for Research on Detection of Pathogen-Induced Cancer (DPIC) (P01)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: December 11, 2014
“This FOA invites revision applications from currently funded NIH P01 program projects. These revision applications are expected to focus on the interactions of carcinogenic pathogens with the human microbiome and the host for the DPIC. This FOA encourages research to assess molecular signatures associated with risk and early detection of pathogen-induced cancer and chronic inflammation associated with progression to invasive cancer. Studies proposed in the revision applications must correspond to a new research project expanding the scope of the parent Program Project grant.”

Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grants (Parent T32)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: January 7, 2015
“The National Institutes of Health (NIH) will award Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grants (T32) to eligible, domestic institutions to enhance predoctoral and postdoctoral research training, including short-term research training, and help ensure that a diverse and highly trained workforce is available to meet the needs of the Nation's biomedical, behavioral, and clinical research agenda. Research training programs will incorporate didactic, research, and career development components to prepare individuals for careers that will have a significant impact on the health-related research needs of the Nation. Programs proposing only short-term research training should not apply to this announcement, but rather to the Kirschstein-NRSA Short-Term Institutional Research Training Grant Program (T35) exclusively reserved for predoctoral, short-term research training (see PA-14-016).”

Scientific Scholar Award
Sponsor: Marsha Rivkin Center for Ovarian Cancer Research
Deadline: December 2, 2014
“The Award is intended to assist promising laboratory and clinical scientists in pursuing a career as an independent investigator in ovarian cancer research. Research funding for ovarian cancer is comparatively low, which discourages talented laboratory scientists and physicians from directing their careers toward ovarian cancer. The Award provides the funds for the best and brightest minds to have an opportunity to begin a career in ovarian cancer research. The program will strive to support the scientific growth and academic success of awardees. The goal is to attract junior investigators as well as established investigators into ovarian cancer research and to develop their potential as leaders. The Award program will produce leaders in multiple areas of ovarian cancer research. Under the guidance of a mentor(s), the Scholar will explore diverse scientific approaches to specific research objectives and develop the skills required of an independent investigator. A successful candidate will provide a convincing argument for why the Scientific Scholar Award will substantially enhance his/her career and development and how the mentor(s) will contribute toward the Scholar’s development as an independent researcher in ovarian cancer. The timeline given in the proposed research plan must be sufficient to support completion of a novel or promising study with proven research objectives. The Award program will support opportunities for junior investigators to interact with senior scientists both locally and nationally. Ultimately, awardees are expected to complete the proposed research plan by the end of the award

Seed Grant Research Program
Sponsor: American Medical Association; American Medical Association Foundation
Deadline: December 5, 2014
“The Foundation established the Program in 2000 to encourage medical students, physician residents and fellows to enter the research field. The program provides grants to supports medical students, physician residents, and fellows in conducting small research projects. Research grants will be given in the areas of cardiovascular/pulmonary diseases and pancreatic cancer and in the area of neoplastic diseases.”

Short-Term Research Education Program to Increase Diversity in Health-Related Research (R25)
Sponsor: NIH; National Heart, Lung and Blood Institute
Deadline: February 18, 2015
“The NIH Research Education Program (R25) supports research education activities in the mission areas of the NIH. The goal of this NHLBI R25 program is to support educational activities that enhance the diversity of the biomedical, behavioral, and clinical research workforce in the mission areas of importance to NHLBI. To accomplish the stated goal, this funding opportunity announcement encourages the development of creative educational activities with a primary focus on Research Experiences.”

Spatial Uncertainty: Data, Modeling and Communication (R01)
Spatial Uncertainty: Data, Modeling and Communication (R03)
Spatial Uncertainty: Data, Modeling and Communication (R21)
Sponsor: US Department of Health and Human Services; NIH
Deadline: January 7, 2015
“The purpose of this funding opportunity announcement (FOA) is to support innovative research that identifies sources of spatial uncertainty (i.e., inaccuracy or instability of spatial or geographic information) in public health data, incorporates the inaccuracy or instability into statistical methods, and develops novel tools to visualize the nature and consequences of spatial uncertainty.”

SPOREs in Human Cancers for Years 2015 and 2016 (P50)
Sponsor: US Department of Health and Human Services; NIH; NCI
Deadline: January 27, 2015
“This Funding Opportunity Announcement (FOA) invites applications for P50 Research Center Grants for Specialized Programs of Research Excellence (SPOREs). The program will fund P50 SPORE grants to support state-of-the-art investigator-initiated translational research that will contribute to improved prevention, early detection, diagnosis, and treatment of an organ-specific cancer (or a related group of cancers). For the purpose of this funding announcement, cancers derived from the same organ system (i.e., group of organs that perform common function) are considered related. Examples of such organ systems include gastro-intestinal, endocrine, circulatory, and other biological systems. Other programmatically appropriate groups of cancers may include those centered around a common biological mechanism critical for promoting tumorigenesis and/or cancer progression in organ sites that belong to different organ systems. For example, a SPORE may focus on cancers caused by the same infectious agent, or sustained and promoted by dysregulation of a common signaling pathway. SPOREs are expected not only to conduct a wide spectrum of research activities, but also to contribute significantly to the development of specialized shared resources core facilities, improved research model systems, and collaborative research projects with other institutions. The research supported through this program must be translational in nature and must always be focused upon knowledge of human biology stemming from research using cellular, molecular, structural, biochemical, and/or genetic experimental approaches with the goal of a translational human endpoint within the project period of the grant. In addition, SPOREs must include both a Developmental Research Program for pilot studies and a Career Enhancement Program to foster careers in translational research related to the focus of the SPORE.”

Stem Cell-Derived Blood Products for Therapeutic Use (R01)
Sponsor: NIH; National Heart, Lung and Blood Institute
Deadline: LOI January 15, 2015
“Stem cell technology holds the promise of providing a nearly limitless source of safe, immune-matched cells for clinical use. One of the first areas where this promise can be realized is through cell products that lack a nucleus and thus face fewer regulatory hurdles, such as red blood cells and platelets. Considerable progress has been made but scientific questions remain and improved tools to enhance the production are required if translation to clinical use is to be achieved. To this end, this FOA will support research addressing remaining scientific questions to enable and accelerate the use of stem cell-derived blood products as therapeutics. While production of sufficient numbers of cells such as platelets and red cells has been demonstrated using cellular engineering methods, basic research questions
related to cell differentiation and maturation remain, which if elucidated, may allow for the development of new ways to efficiently produce clinically-useful stem cell-derived platelets or red blood cells. In addition to this FOA, two companion FOAs (RFA-HL-15-029 and RFA-HL-15-030) will support small business research to develop improved techniques and tools to enhance the production of clinically-relevant, functional stem cell-derived red blood cells or platelets in a more efficient and cost-effective manner.”


Stem Cell-Derived Blood Products for Therapeutic Use: Technology Improvement (R41)

New! Stem Cell-Derived Blood Products for Therapeutic Use: Technology Improvement (R43/44)

Sponsor: NIH; National Heart, Lung and Blood Institute

Deadline: LOI January 20, 2015

“The primary objective of this funding opportunity announcement is to support the development of improved techniques and tools to enhance the production of clinically-relevant, functional stem cell-derived red blood cells or platelets in a more efficient and cost-effective manner. The research supported will develop and enhance technologies that enable the production of functional stem cell-based therapies with potential commercial and clinical viability.”


System-Level Health Services and Policy Research on Health Disparities (R01)

Sponsor: NIH; National Institute on Minority Health and Health Disparities

Deadline: LOI December 20, 2014

“Although scientific and technological discoveries have improved the health of the U.S. population overall, racial/ethnic minority populations, socioeconomically disadvantaged populations, and rural populations continue to experience a disproportionate burden of disease. As the Nation’s steward of biomedical and behavioral research, NIH has devoted considerable resources to characterize the root causes of health disparities. As a result of these efforts, a complex and multi-factorial web of interconnected and overlapping factors (i.e., biological, behavioral, environmental, and societal) has emerged. As an important next step, research is needed that capitalizes upon this knowledge about causal pathways to directly and demonstrably contribute to the elimination of health disparities. Of particular importance is research that moves beyond a focus on the health status of individuals to examine and address how larger systemic factors cause, sustain, or minimize health disparities in communities, regions, and the Nation as a whole. Research Objectives Investigators who conduct original and innovative system-level health services or policy research directed toward eliminating health disparities are encouraged to apply to this FOA. Projects may include observational/descriptive, simulation, or interventional studies and may involve primary data collection and/or secondary analysis of existing datasets. Projects must include a focus on one or more health disparities populations, which include Blacks/African Americans, Hispanics/Latinos, American Indians/Alaska Natives, Asian Americans, Native Hawaiians and other Pacific Islanders, socioeconomically disadvantaged populations, and rural populations.


Technologies for Improving Minority Health and Eliminating Health Disparities (R41/42)

Sponsor: NIH; National Institute on Minority Health and Health Disparities

Deadline: LOI December 23, 2014

“The purpose of this funding opportunity is to stimulate a partnership of ideas and technologies between innovative small business concerns (SBCs) and non-profit research institutions resulting in improving minority health and the reduction of health disparities by commercializing innovative technologies. Healthy People 2020 defines a health disparity as a particular type of health difference in the incidence, prevalence, morbidity, and burden of diseases and other adverse health outcomes that is closely linked with social, economic, and/or environmental disadvantage. NIH defined health disparity population groups include racial/ethnic minorities (African Americans, American Indians, Alaska Natives, Asian Americans, Hispanic Americans, Native Hawaiians, and other U.S. Pacific Islanders), socioeconomically disadvantaged individuals, and individuals residing in rural areas. Appropriate technologies must be effective, affordable, culturally acceptable, and easily accessible to those who need them. This announcement is expected to reduce health disparities within and across the priority areas of cardiovascular disease, stroke, cancer,
Research Objectives and Scope
This initiative is intended to stimulate a partnership of ideas and technologies SBCs and non-profit research institutions to develop a product, process or service for commercialization with the aim of reducing disparities in healthcare access and health outcomes. Appropriate technologies should be effective, affordable, culturally acceptable, and deliverable to racial/ethnic minorities, low-income and rural populations. Technologies to be developed may be new and innovative or they may arise from existing technologies that have been redesigned based on the needs of one or more disparity populations. To be effective, a technology must provide an improvement over current quality of care for a health disparity population by overcoming one or more of the barriers.

These include:
- Physical Barriers – factors such as proximity to healthcare facilities and transportation may limit access to healthcare.
- Knowledge Barriers - health literacy and language barriers can inhibit healthcare delivery, as well as a lack of patient information for the healthcare provider.
- Infrastructure Barriers - rural hospitals and community health centers may not have the same resources and expertise of large hospitals, and may not be able to afford advanced medical technologies.
- Economic Barriers - lack of insurance coverage or financial resources may also contribute to disparities in healthcare access.
- Cultural Barriers - religious beliefs and social customs often deter certain populations from seeking healthcare.

The technology must also be affordable to the local hospital, community health center, primary care physician, or individual patient in need. The development of a technology must be amenable to the population’s cultural beliefs and social customs. This is critical to the successful delivery of quality healthcare. Technologies that might achieve the objectives of this initiative may be as follows:

- Innovative products or services that facilitate or enhance care coordination between primary care providers, hospital emergency department staff, specialty physicians, nurse practitioners, providers of mental health and behavioral health services, patient navigators, etc., in medically underserved communities and regions.
- Culturally attuned behavioral interventions or low-cost tools and technologies (e.g. software apps for mobile devices) that promote health-seeking behaviors (diet choice, exercise/physical activity, oral hygiene, medication adherence, child immunizations, etc.) and reduce risky behaviors (smoking, alcohol/drug misuse, unsafe sex, etc.)
- Tools, technologies and methods to enhance detection, measurement, and risk assessment of a broad array of environmental exposures (pollutants, allergens, noise, crime, etc.), to characterize exposomes for individuals and communities, and to link this information to physiological responses and health indicators at individual and population levels. These technologies may include efforts to improve data collection and data integration across disparate data sources, including clinical patient data, public health data, census data, housing data, employment data, crime statistics, etc.
- Products or services that expand access to and utilization of high-quality prenatal care and reduce the frequency of high-risk pregnancies in health disparity populations.
- Products or services that enhance quality of life and reduce health disparities among people with disabilities.
- Innovative software, tools and technology for Science and Health Education such as curriculum materials, interactive teaching aids, models for classroom instruction for K-12 and undergraduate students and general public.
- Mobile health (mHealth) and telehealth/telemedicine technologies and apps for communication, diagnosis, monitoring, evaluation, medical management, tracking and treatment in underserved community settings and rural and remote locations.


Technologies for Improving Minority Health and Eliminating Health Disparities
Sponsor: US Department of Health and Human Services
Deadline: December 23, 2014

“The purpose of this funding opportunity is to stimulate a partnership of ideas and technologies between innovative small business concerns (SBCs) and non-profit research institutions resulting in improving minority health and the reduction of
health disparities by commercializing innovative technologies. Healthy People 2020 defines a health disparity as a particular type of health difference in the incidence, prevalence, morbidity, and burden of diseases and other adverse health outcomes that is closely linked with social, economic, and/or environmental disadvantage. NIH defined health disparity population groups include racial/ethnic minorities (African Americans, American Indians, Alaska Natives, Asian Americans, Hispanic Americans, Native Hawaiians, and other U.S. Pacific Islanders), socioeconomically disadvantaged individuals, and individuals residing in rural areas. Appropriate technologies must be effective, affordable, culturally acceptable, and easily accessible to those who need them. This announcement is expected to reduce health disparities within and across the priority areas of cardiovascular disease, stroke, cancer, diabetes, HIV/AIDS, infant mortality, mental health, and obesity, as well as lung, liver, and kidney diseases, psoriasis, scleroderma, and other diseases, illnesses, and conditions of public health importance.


**Therapeutic Development Initiative (TDI) – Funding for High-Impact Pediatric Cancer Research**
Sponsor: Solving Kids’ Cancer
Deadline: N/A; Continuous
“The TDI’s goal is to support innovative clinical studies that are high on the risk/ reward spectrum while, at the same time, investigating these research questions efficiently and effectively. Priority is given to proposals that introduce therapeutic agents and modalities which are first-in-children and have a strong potential to improve treatment outcomes. The TDI supports clinical testing of promising therapies that may significantly and fundamentally improve treatment for children with pediatric cancer. While SKC values pre-clinical research, only clinical studies are supported via the TDI program. Final pre-clinical work that is requisite to the submission of a protocol may be considered in certain circumstances. The clinical study must focus on neuroblastoma, pediatric CNS tumors and/or sarcomas. Additional pediatric cancer types included in the study protocol may be acceptable.”


**Travel Grants – AACR Minority-Serving Institution Faculty Scholar in Cancer Research Awards**
Sponsor: AACR
Deadline: December 19, 2014
“The American Association for Cancer Research (AACR) is extremely pleased to announce the availability of Scholar Awards in Cancer Research for full-time faculty members of Minority-Serving Institutions (Historically Black Colleges and Universities, Hispanic Serving Institutions, and other Minority Institutions as defined by the US Department of Education). The purposes of this award program are to increase the scientific knowledge base of faculty members at Minority-Serving Institutions, and to encourage them and their students to pursue careers in cancer research. These awards are presented by the American Association for Cancer Research to scientists at the level of assistant professor or above at a Minority-Serving Institution, who are engaged in meritorious basic, clinical, or translational cancer research. AACR Special Conferences on focused topics in cancer research have gained wide recognition as unique opportunities for in-depth discussion of important scientific issues in attractive, informal resort environments. When reviewing applications, the Award Selection Committee will also strongly consider the following factors:
- candidates who are presenters of an abstract submitted for presentation at the meeting (or who have students presenting an abstract on which the candidate is an author);
- first time applicants; and
- financial need for travel funds.”


**Travel Grants – AACR Scholar-in-Training Awards – Other Conferences and Meetings**
Sponsor: AACR
Deadline: Varies
“The AACR offers Scholar-in-Training Awards to enhance the education and training of early career scientists by providing financial support for their attendance at AACR conferences and meetings. These awards are provided to offset a portion of the registration, travel and subsistence expenses incurred in attending these programs. Applicants should visit the meetings and workshops calendar for a list of upcoming programs and details on financial support available http://bit.ly/TX1cdP. Application procedures may vary by conference.

Travel Grants – Minority Scholar in Cancer Research Awards  
Sponsor: AACR  
Deadline: December 12, 2014  
“AACR Minority Scholar Awards in Cancer Research are offered to eligible minority scientists wishing to participate in Annual Meetings and Special Conferences of the AACR. The awards provides opportunities and support for research training and career development of minorities and for involving minority institutions in cancer research, research training, education, and outreach. These awards are intended to enhance the education and training of minority researchers and to increase the visibility and recognition of minorities involved in cancer research.”


Travel Grants – Scholar-in-Training Awards: Annual Meeting  
Sponsor: AACR  
Deadline: December 3, 2014  
“Awards are available to Associate Members who are first authors and presenters of meritorious abstracts through the support of numerous foundations and corporations. The 2015 AACR Annual Meeting will take place April 18-22, 2015 in Philadelphia, Pa. The program covers every aspect of cancer - from epidemiology, molecular biology, clinical studies, and prevention to survivorship and patient advocacy.”


Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research (U01)  
Sponsor: US Department of Health and Human Services, NIH, NCI  
Deadline: February 20, 2015  
“This FOA, issued by the NCI, encourages the submission of grant applications that propose to advance research in cancer etiology and early detection biomarkers, utilizing the advantages of the unique biorepository resources of the NCI-sponsored PLCO Screening Trial. The PLCO Biorepository offers high-quality, prospectively collected, serial pre-diagnostic blood samples from the PLCO-screened arm participants, and a onetime collection of buccal cells from the control arm participants. Available data associated with the biospecimens includes demographic, diet, lifestyle, smoking, screening results, and clinical data. This FOA supports a wide range of cancer research including, but not limited to, biochemical and genetic analyses of cancer risk, as well as discovery and validation of early detection biomarkers. The proposed research project must involve use of PLCO biospecimens; additionally, it should also take advantage of the unique characteristics of the PLCO biospecimens. Research projects that do not involve the use of PLCO biospecimens will not be supported.”


V Foundation Research Grants – Limited Submission  
Sponsor: V Foundation  
Deadline: Unspecified  
“The V Foundation for Cancer Research currently awards the following three types of grants:  
1. The V Scholar Program - Designed to identify, retain and further the careers of talented young investigators. Provides funds directly to young scientists who are developing their own independent laboratory research projects. These grants enable talented young scientists to establish their laboratories and gain a competitive edge necessary to earn additional funding from other sources. The V Scholars determine how to best use the funds in their research projects.  
2. The V Foundation Grants in Translational Clinical Research - Facilitates the transition of projects from the laboratory to the clinic. Translational researchers seek to apply basic knowledge of cancer and bring the benefits of the new basic-level understandings to patients more quickly and efficiently.  
3. The Designated Grant Program - Funds projects in communities or regions local to the fund-raising area. Fund-raisers and donors work with the Foundation to identify a specific project, facility or awareness program.”


Visiting Fellowships  
Sponsors: US Department of Health and Human Services; NIH; NCI  
Deadline: N/A; Continuous  
“The NIH Postdoctoral Visiting Fellowship provides training experience for foreign postdoctoral CCR/NCI scientists in basic, clinical, or behavioral research aimed at preventing, diagnosing, or treating cancer are available. Postdoctoral Visiting Fellowships provide the opportunity for recent doctoral degree recipients to enhance their research skills in the resource-rich NIH environment”