Grant-in-Aid

Application Deadlines:

- Founders Affiliate – July 28, 2016
- Great Rivers Affiliate – July 28, 2016

Award Activation: Jan. 1, 2017

The application must be submitted by 5:00 p.m. Central Time in Grants@Heart on the deadline date. The application will be submitted to the designated grant officer, who will submit it to the American Heart Association (AHA).

Program Description, Eligibility and Peer Review Criteria

Objective

To support independent investigators with innovative and advanced projects related to cardiovascular disease and stroke.

Science Focus

All basic, clinical, and population research broadly related to cardiovascular disease and stroke.

Target Audience

At the time of application the applicant must:

- Hold a faculty or staff appointment and be conducting independent research.
- Hold a M.D., Ph.D., D.O., D.V.M. or equivalent post-baccalaureate doctoral degree.

While no minimum percent effort is specified, the principal investigator must demonstrate that adequate time will be devoted to ensure successful completion of the proposed project.

Citizenship

At the time of application, must have one of the following designations:

- United States citizen.
- Permanent resident.
• Pending permanent resident (any resident who has an approved I-765 form and has submitted an I-485 application with the United States Citizenship and Immigration Services)
• E-3 Visa - specialty occupation worker.
• H-1B Visa - temporary worker in a specialty occupation.
• J-1 Visa - exchange visitor.
• O-1 Visa - temporary worker with extraordinary abilities in the sciences.
• TN Visa – North American Free Trade Agreement (NAFTA) professional.
• G-4 Visa - family member of employee of international organizations.

The awardee must maintain one of the designations listed above throughout the duration of the award.

Location of Project

The award must be conducted at any accredited institution in one of the following affiliates:

**Founders** - Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island, Vermont

**Great Rivers** - Delaware, Kentucky, Ohio, Pennsylvania, West Virginia

**SouthWest** - Arkansas, Colorado, New Mexico, Oklahoma, Texas, Wyoming

**Western States** - Alaska, Arizona, California, Hawaii, Idaho, Montana, Nevada, Oregon, Utah, Washington

American Heart Association research awards are limited to non-profit institutions, including medical, osteopathic and dental schools, veterinary schools, schools of public health, pharmacy schools, nursing schools, universities and colleges, public and voluntary hospitals and other institutions that can demonstrate the ability to conduct the proposed research. Applications proposed by federal institutions or employees will not be accepted, except for applications to the AHA’s Cardiovascular Genome Phenome Study (“CVGPS”), and applications from Veterans Administration employees.

Funding is prohibited for projects conducted at institutions outside the United States.

Budget

**Award:** $77,000, including indirect costs
**Total Award Amount:** $154,000
**Indirect Costs:** 10 percent of total award amount

**Salary/Fringe:** Up to 50 percent of total award amount for salary and fringe of the principal investigator, any collaborating investigators, and other participants with faculty appointments. Amount paid to participants may not exceed percent effort invested by those participants.

**Project Support:** Salaries of technical personnel without faculty appointments essential to the conduct of the project, supplies, equipment, volunteer subject costs, and publication costs.

**Travel:** Up to $3,000 annually. International travel is permitted without prior AHA approval.

**Duration:** Two years

Restrictions

• The awardee may not hold more than one AHA award concurrently:
  
  **Exception(s):**
  
  1) An investigator may hold two AHA grants (affiliate and Association-wide) concurrently if no more
than six months remaining on the initial award and the projects have no budgetary or scientific overlap.

2) An investigator may hold an Innovative Research Grant and one other Association-wide or affiliate award.

3) A Fellow-to-Faculty Transition Award recipient may hold a Grant-in-Aid during the faculty phase. Only project support is allowed from the Grant-in-Aid award during the faculty stage of the Fellow-to-Faculty Transition Award.

- At award activation, the awardee may not be extramurally funded at a level greater than $250,000 annually (excluding principal investigator salary and fringe and indirect costs).

- The applicant may submit only one affiliate application per deadline. If eligible, the applicant may simultaneously submit both an affiliate and an Association-wide application during the same funding cycle. If both applications are funded, the applicant must choose one award.

- Awards may not supplement or duplicate currently funded work. Submitted applications must describe projects that are clearly distinct from ongoing research activities in the applicant's laboratory. The awardee may not hold a comparable award as a source of supplementation.

- The applicant may resubmit the same or similar application three times (the original plus two resubmissions). The same or similar application submitted the fourth time will be administratively withdrawn.

- The awardee may not be a current recipient of any training award, such as the National Institutes of Health mentored K-series award or the AHA Postdoctoral Fellowship.

- Submission of a Grant-in-Aid application that contains content that is identical or significantly similar to that of any other application -- especially the mentee's training application -- is prohibited. Both applications will be recommended for disapproval. However, both applications may be funded if aims are not duplicated.

Peer Review Criteria

An applicant is prohibited from contacting AHA peer reviewers. This is a form of scientific misconduct and will result in removal of the application from funding consideration and institutional notification of misconduct.

To judge the merit of the application, reviewers will comment on the following criteria. Please be sure that you fully address these in your proposal.

1. **Significance:** Does this study address an important problem broadly related to cardiovascular disease or stroke? If the aims of the application are achieved, how will scientific knowledge or clinical practice be advanced? What will be the effect of these studies on the concepts, methods and technologies that drive this field?

2. **Approach:** Are the conceptual framework, design, methods and analyses adequately developed, well integrated, well-reasoned and feasible (as determined by preliminary data) and appropriate to the aims of the project? Does the applicant acknowledge potential problem areas and consider
alternative tactics?

3. **Innovation**: Is the project original and innovative? For example: Does the project challenge existing paradigms and address an innovative hypothesis or critical barrier to progress in the field? Does the project develop or employ novel concepts, approaches, methodologies, tools or technologies for this area?

4. **Investigator**: Is the investigator appropriately trained and well suited to carry out this work? Is the work proposed appropriate to the experience level of the principal investigator and other researchers? Does the investigative team bring complementary and integrated expertise to the project (if applicable)?

5. **Environment**: Does the scientific environment in which the work will be done contribute to the probability of success? Do the proposed studies benefit from unique features of the scientific environment, or subject populations, or employ useful collaborative arrangements? Is there evidence of institutional support?

6. **Impact**: How does this project relate to and support the mission of the American Heart Association to **building healthier lives, free of cardiovascular diseases and stroke**?

**Interim Reporting**
An awardee must submit annual progress reports that includes research findings, abstracts, and publications, and names of trainees supported.