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## MPN CHALLENGE APPLICATION

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Applicants should prepare a grant application following the format described below and email this full proposal to the MPN Research Foundation no later than April 1, 2019. Please title the PDF or Word file as follows: Last Name(space)First Name(space) Institution (space)2019. The proposal should be emailed to the attention of Michelle Woehrle at [mwoehrle@mpnrf.org](mailto:mwoehrle@mpnrf.org).

**2019 MPN CHALLENGE GRANT PROPOSAL  
Cover Sheet**

**Investigator Summary\***

Investigator(s):

Investigator Title(s):

Investigator Position(s):

E-mail address(es):

Department(s)/Division(s)/Institution(s) or Company:

Address(es):

Phone Number(s):

**Biographical Summary & relevant Published Work: (brief CV (max 5 pages) may be attached; do not attach longer CV, although a link may be provided)**

\*If there are co-principal investigators, please include identifying information for each

**2019 MPN CHALLENGE GRANT PROPOSAL**  
**Project Description**

**Project Summary**

Institution/Company(s) where work will be done:

Project Title:

Focus Area(s) Addressed by Project (check all that apply):

FOCUS AREAS	yes/no
Immunotherapeutic approaches for MPN	
Targeting the driver mutations associated with MPNs	
New mechanisms of action	
Repurposing existing FDA approved drugs for use in MPN	
Development of biomarkers of disease progression	
Quality of life research	
Stem cell transplantation	

Project Abstract (200 words or less):

**Project Description**

Project Description should be no more than three to five pages, single spaced, font size no smaller than 11; the 5 page limit should include any figures and tables.

- Specific Aims (please list)
- Scientific rationale/Previous Work (upon which this project will be based)
- Research Plan/Anticipated results
- Innovation statement
- Resources and Environment
- Plans for Investigator Interaction

Human and/or Animal Investigation Statement (description of any IRB approval/status required for this project) should be appended but is not part of the 5 page limit on Project Description.

**2019 MPN CHALLENGE GRANT PROPOSAL  
Budget Information**

**Budget**

Proposals may request up to the full amount of the grant including up to 8% indirect costs. Awards are anticipated to not to exceed a total of \$200,000 for a two-year grant period.

**Personnel:**

Name	Role on Project	%	Salary	Fringe Amt.	Salary Total
PERSONNEL TOTAL					\$xxx,xxx

**Budget Summary:**

Category	Amount
Personnel Total (from table above)	
Consultant costs	
Equipment	
Supplies (itemize by category in budget justification)	
Procedures/labs	
Patient care	
General services	
Travel	
Other expenses	
TOTAL COST	\$xxx,xxx

**Budget Justification:** (if appropriate to further describe costs above; please limit justification to a maximum of one page)