

LLeRA#

Office of Research Affairs 11219 Anderson Street, Loma Linda, CA, 92354 Ext. 88544, FAX 558-0244

Internal Grant Letter of Intent

Pre-Proposal Process - Complete this form and follow the Pre-Proposal instructions on the GRASP RFA. Email to rapreaward@llu.edu

I. PROPOSAL INFORMA	ΓΙΟΝ			
Proposal/Project Title				
Funding Mechanism Proposed Project Start Date		Revision of Application If yes, previous LLeRA #		
Principal Investigator	Degree	Academic Title	Department	
Email	School	If previous awardee, select mechanism, list LLeRA number(s) and provide eligibility on a separate page. LLeRA(s)		
Principal Investigator	Degree	Academic Title	Department	
Email SDA Institution (if GRASP-Intl a		If previous awardee, select mechanism, list LLeRA number(s) and provide eligibility on a separate page. LLeRA(s)		
Yes No	ALITY CONTROL (Check those st	atements which apply.)		
1. The project involves human subjects. If yes, date of IRB approval: IRB #:				
2. The project involves vertebrate animals. If yes, date of IACUC approval: IACUC#:				
4. The project involv	es ionizing radiation. If yes, date o es potentially biohazardous mater or microorganisms. If yes, date of	ial or recombinant DNA, s	uuch as plasmids, viral vectors, or genetically nmittee approval:	
III. INSTITUTIONAL RESEA	RCH THEMES (Check all themes t	hat relate to this proposal.)		
Lifestyle/Vitality/Longevity		Stroke/Brain Trauma/Neurological Disease		
Maternal/Fetal/Neonatal Health		Health Disparities among Diverse Populations		

Maternal/Fetal/Neonatal Health	Health Disparities among Diverse Populations	
Regenerative Medicine	International Health	
Infectious Disease	Other, please specify:	
Cancer		

Each signer below certifies that:

- 1. He/She has reviewed the eligibility requirements and certifies that he/she meets all of them.
- 2. He/She has reviewed this proposal and approves of this activity and acknowledges his/her responsibility for
- implementing the University policies and guidelines which apply to the proposal referenced above. 3. He/She certifies that the information submitted within the application is true, complete and accurate to the best of
- 3. He/She certifies that the information submitted within the application is true, complete and accurate to the best of his/her knowledge.
- 4. He/she agrees to accept responsibility for the scientific conduct of the project and to provide the required reports if awarded.
- 5. For GCAT Fill in page 2 (Read eligibility requirements carefully.

Principal Investigator Signature

Principal Investigator Signature



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Indicate if GCAT -