Request for Proposals:
2025 LCRF Minority Career Development Award (CDA) in Lung Cancer

1. Program Summary

National Institutes of Health (NIH) funding is considered a prerequisite for establishing independence, academic promotion,recognition as an expert, serving on grant review panels, and leadership roles. Minority applicants are less likely to receive grants, to have the R phases of K01 or K99 awards activated, need more submissions to obtain funding, and often will not resubmit proposals.[1-5] As minority applicants must overcome systemic and structural barriers due to race, ethnicity, country of origin, socioeconomic status, and/or language, many leave academia which further exacerbates the lack of diversity in Science, Technology, Engineering and Mathematics (STEM) and medical fields. To provide protected time and mentoring to these trainees, we continue to offer the LCRF Minority Career Development Award (CDA) for Lung Cancer for minority Postdoctoral/Clinical Fellows and Assistant Professors within 10 years of completing their MD training and/or PhD degrees to submit proposals.

The LCRF Minority Career Development Award (CDA) for Lung Cancer is a two-year career development award intended to support early-stage scientists from underrepresented groups working in lung cancer and working in diverse areas of research including basic, clinical, translational, disparities, and social determinants of health research. The objective of this award is to increase the number of highly skilled and trained researchers from groups that are historically underrepresented in academia, medicine, and leadership in lung cancer research. This program aims to close the gap between the mortality rates and representation in lung cancer research by funding minority researchers with $150,000 over a period of two years.

We encourage applications on a wide variety of topics including but not limited to the following:

- Lung cancer biology
- Risk reduction and screening for early detection
- Identification of new biomarkers
- Development of more effective and less toxic therapies including but not limited to targeted and immune-therapies
- Genetic and gene-environment interactions
- Interactions and contributions of multiple factors (e.g. smoking, genetics, environment, societal factors) to disparities in lung cancer outcomes
- Mechanisms of sensitivity and resistance to lung cancer therapies
- Bioengineering approaches to understanding and/or treating lung cancer (i.e., theranostics, biomaterials, nanotechnology, controlled-drug release, and gene-therapy)
- Supportive measures for people with lung cancer and their families
- Identification of metabolic vulnerabilities in lung cancer

- Real world data to discover where and why disparities exist, to fill gaps for new drugs' approval, or to create eligibility criteria that reflect patient community that will use the drugs
- Access to reliable and affordable biomarker testing, quality care, appropriate treatment options

2. Eligibility Criteria

Investigators must be from racial or ethnic groups that are underrepresented in health-related sciences and biomedical research. This includes Blacks or African Americans, Hispanics or Latinos, American Indians or Alaskan Natives, Native Hawaiians and other Pacific Islanders. Individuals from racial or ethnic groups that can demonstrate convincingly that they are underrepresented by the host institution will also be eligible. [1] Investigators will need to fill out demographic information and provide a short statement from their Institution indicating their eligibility. Investigators must be affiliated with a non-profit academic or research institution and must be post-doctoral researchers, clinical fellows, or early-career and mid-career investigators within 10 years of receiving their MD and/or Ph.D. However, exceptions will be made for investigators with more than ten years' experience in other disease areas or topics. Exceptions may also be made for those who did training outside the US.

Applicants from US-based and international institutions are eligible to apply and may hold any residency/citizenship status. Applicants may only apply for one LCRF grant per grant cycle. Applicants are prohibited from applying if they have received funding from the LCRF within the last 4 years. Applicants are prohibited from applying in more than one of LCRF's funding tracks in the same cycle. Ineligible investigators with these or other special circumstances may request review by contacting the LCRF grants office before the submission of an application. (see Inquiries section below). Ineligible applications and new requests under special circumstances will not be considered after submission deadline.

3. Budget Requirements

The maximum award amount is $150,000 for a period of two years (disbursed at $75,000 per year). Additional budget requirements are:

- Funding from this award may not be used to support institutional indirect / facilities and administrative costs.
- The LCRF grant must be the primary source of support for the project. Additional secondary funding (e.g. for core services support) is permitted.
- There is no limit on the amount of salary support that may be requested. However, appropriate justification for all budget items is required. Any salary requests totaling in excess of 20% of the budget must be explicitly justified. Queries related to justification should be sent to LCRF at least a week before submission deadline.

[1] https://extramural-diversity.nih.gov/diversity-matters/underrepresented-groups

- Any equipment costs must be limited and directly applicable to the research project (i.e. large, general equipment costs are not permitted).
- Direct patient care costs that could be reimbursed by other sources will not be covered.
- Travel and publication costs are permitted.

4. Open Science and Data Sharing Policy

LCRF is committed to promoting open science by helping to increase access to investigators' findings and improving collaboration and data sharing among the lung cancer research community. Accordingly, it is a condition of LCRF funding that all peer-reviewed articles supported in whole or in part by LCRF funds must be made available in the PubMed Central online archive no later than twelve months after publication. In addition, LCRF grantees must indicate explicitly in all reports, publications, and other research communications whether the data, methods used in the analysis, and materials used to conduct the research will be made available to any researcher for purposes of reproducing the results or replicating the procedure. At the time of application, all investigators must indicate if they will or will not make their data, analytic methods, and study materials available to other researchers.

5. Application Instructions and Requirements

A. Go to https://proposalcentral.com/ and login under the "Application Login" section. After logging in, complete your Professional Profile before starting an application If you are already registered with Proposal Central, access the site and log in with your Username and Password. If you do not have an account yet, please click on "Need an account?" and follow the instructions.
B. Click on the "Grant Opportunities" Tab.
C. A list of applications will be displayed. The list of applications can be filtered for just this organization by clicking "Filter by Grant Maker" at the top and selecting "Lung Cancer Research Foundation" in the drop-down menu. Find the "LCRF Pilot Grant" and click the "Apply Now" button in the "Apply Column".
D. See the deadlines for the LOI stage, if applicable, and the Proposal stage. **All deadlines are in US Eastern Time**. If a document icon is showing, you can click on it to download it. This includes necessary information about the deadline from the grant maker.
E. Click the link or download the document in the Contact Information column. Clicking the link opens an email to the program administrator. If a document is provided instead, it includes the grant maker contact information.
F. Technical assistance related to submission will not be provided after 5 PM US Eastern Time on the day of submission deadline. Applicants are encouraged to contact LCRF (see inquiries section below) well before the deadline.

All applications for funding must be submitted online at Proposal Central through a two-stage process consisting of a letter of intent (LOI) and full proposal. Applicants may only apply for one LCRF grant per grant cycle. Upon submission and review of the LOI, applicants whose submission is reviewed favorably will be invited to complete a full proposal. Any applications for

an extension of a previously awarded grant require resubmission as a new complete application (LOI and subsequent full proposal) and must include an update describing the progress made during the prior award period. Specific Aims at the LOI stage do not require references and should not exceed 1 page. Text should be Arial, Times New Roman, Palatino Linotype, Courier New, Georgia, or Helvetica 11-point font or higher. Margins should not be less than 0.5" on standard letter paper (8 ½" x 11"), and you must verify the margins on the documents that you upload.

The following application components are required for a complete submission:

Letter of Intent	**Full Proposal**

• General Information / Demographics
• Specific Aims (one page in length)
• NIH Biosketch (NIH Biosketch Instructions)
	• General Information
	• Demographics
	• Eligibility Statement from the Institution
	• NIH Biosketch
	• Mentoring Plan (one page in length)
	• Lay Summary
	• Specific Aims (one page in length)
	• Narrative (six pages maximum):
	  ○ Background and Significance
	  ○ Preliminary Data (if applicable)
	  ○ Experimental Approach
	  ○ References (not included in page-limit)
	• Success Factors
	• Timeline
	• Future Plans
	• Budget
	• Letter(s) of Support, including the Mentor letter

- Eligibility Statement
  - Several sentences to one paragraph stating eligibility.
  - This will not be shown to reviewers.
- Key words (up to 5 key words describing the work that will help with review selection)
- Mentoring/Professional Development Plan (1 page)
  - Mentor/Mentoring Team and how they will work with applicant
  - Trainee's accessibility to the mentoring team
  - Trainee's plan for professional development
  - List any course/workshops
  - Applicants career goals
- NIH Biosketch* (no more than 5 pages per person)
  *Additional Considerations:
  - The application must include a NIH biosketch of the primary investigator and any key personnel involved in the project.

- The application must include at least one letter of support from the applicant's primary mentor affirming the following statements:
  - The applicant will be formally affiliated with and/or employed by the institution/organization during the grant period.
  - There is adequate institutional space and equipment to accomplish the proposed project.
  - The mentor's willingness to serve as a mentor for the applicant.

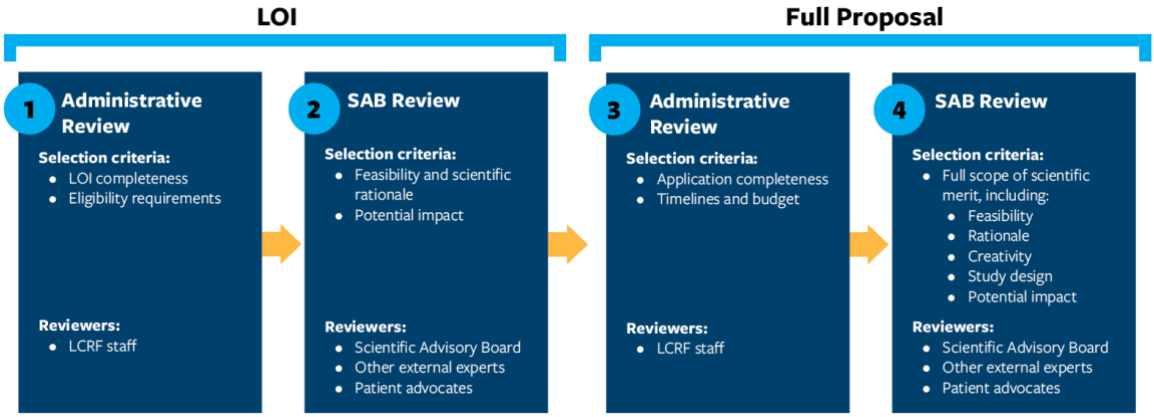
6. Timeline

LOIs due	March 3, 2025
Applicants notified of LOI decision	April 18, 2025
Full proposal submission deadline	June 2, 2025
Notification of award	November 2025
Project start	December 1, 2025

7. Evaluation of Applications

All applications are evaluated using a two-stage review process that includes review of LOIs and select full proposals. Only applicants whose LOI is reviewed favorably will be invited to submit a full proposal. At each stage, the evaluation consists of an administrative review, a comprehensive review by LCRF's Scientific Advisory Board and a review conducted with patient advocates (see figure below). At the LOI stage, evaluations will focus on high-level aspects of the research proposal including overall rationale, feasibility, and potential impact on the lung cancer field. At the full proposal stage, submissions will additionally be evaluated for sound scientific rationale, study design, feasibility, and creativity/innovation. Similar to an NIH R21 award, reviewers at the LOI stage and at the full proposal stage will be asked to provide an impact score reflecting their assessment of the likelihood for the project to exert a sustained, powerful influence on the field of lung cancer research and/or reducing disparities in lung cancer outcomes.

Application review process:



8. Award Notification and Announcement

All applicants will be notified of their award status by the date specified in the Timeline section above. Regrettably, due to the high volume of submissions, LCRF is not able to provide feedback on LOIs or proposals that are not selected to receive an award.

9. Post-award Reporting Requirements

During the funding period, all investigators are required to submit at least two scientific progress reports and at least four lay audience update reports including the following:

Report Type	Due Date
Interim Report	At conclusion of year one of the grant term
Final Report (includes financial summary report)	Within sixty days of conclusion of the grant term
Lay audience update	Every six months after project start date

All reporting is required to be done in Proposal Central, and additional reports may be assigned when project terms are amended (e.g. in the case of a no-cost extension or institutional transfer). Receipt of the second year of funding is contingent upon submission and approval of the interim progress report at the conclusion of the first year of the grant term.

10. Inquiries

For questions, please contact the LCRF office at grants@lcrf.org or +1 (212) 588-1580. OR

If you have any difficulties registering, logging in, or creating your application, contact Proposal Central Customer Support at: 800-875-2562 (Toll-free U.S. and Canada), +1-703-964-5840 (Direct Dial International). 875-2562 (Toll-free U.S. and Canada), +1-703-964-5840 (Direct Dial International).

References

1. Ginther DK, Schaffer WT, Schnell J, Masimore B, Liu F, Haak LL, and Kington R. (2011).” Race, Ethnicity, and NIH Research Awards.” *Science*. 333(6045):1015-9.
2. Hoppe TA, Litovitz A, Willis KA, Meseroll RA, Perkins MJ, Hutchins BI, Davis AF, Lauer MS, Valantine HA, Anderson JM, and Santangelo GM. (2019). “Top choice contributes to the lower rate of NIH awards to African-American/black scientists”. *Sci Adv.*5(10):eeaw7238. doi:10.1126/sciadv.aaw7238.
3. Pickett C. (2018). “Examining the distribution of K99/R00 awards by race.” rescuingbiomedicalresearch.org/blog/examining-distribution-k99r00-awards-race/ [Accessed Aug. 24, 2021].
4. Eblen MK, Wagner RM, RoyChowdhury D, Patel KC, and Pearson K. (2016). “How criterion scores predict the overall impact score and funding for national institutes of health peer-reviewed applications0”. *PLos One*. 11(6):e0155060.
5. Erosheva EA, Grant S, Chen M-C, Lindner MD, Nakamura RK, and Lee CJ. (2020). NIH peer review: criterion scores completely account for racial disparities in overall impact scores. *Sci Adv*. 6(23):eaaz4868.