



# A Walk Through The SF424 (R&R)

**Presented by  
David Curren & Pam Gilden**

**Office of Policy for Extramural Research Administration**



# What is the SF424 (R&R)?

- Stands for Standard Form 424 – Research and Related
- Is actually a combination of separate forms focusing on the many aspects of a proposed grant.
- Is used government-wide to apply for all Research and Research-related grants.
  - Used by 15 different Federal agencies
  - Based on needs of all agencies, and not tailored to specific agencies, funding opportunities, or grant programs
  - Allows use of agency-specific forms and special instructions where appropriate



# Features of the SF424 (R&R)

- A complete application to NIH will include a combination of (R&R) components & PHS 398 components
- The applicant **must** complete the application using the package attached to that particular Funding Opportunity Announcement (*Information is drawn from the specific FOA and auto-completed for use in the forms*)
- Applicants should *not* use any forms or sample forms from other announcements
- Allows applicants to complete data entry in all necessary components and upload appropriate attachments



# Features of the SF424 (R&R) (cont.)

- SF424 (R&R) Components used for NIH grant applications include:
  - SF424 (R&R)—*An application cover component*
  - Research & Related Project/Performance Site Location(s)
  - Research & Related Other Project Information
  - Research & Related Senior/Key Person - Expanded
  - Research & Related Budget
  - Research & Related Personal Data (*NIH does not use*)
  - R&R Subaward Budget Attachment Form
  - SBIR/STTR Information



# Features of the SF424 (R&R) (cont.)

- NIH requires additional data collection to accommodate the unique information required for review of its biomedical research portfolio. Therefore, these agency-specific components (titled PHS 398) were also developed:
  - PHS 398 Cover Letter File
  - PHS 398 Cover Page Supplement (*supplements the R&R Cover*)
  - PHS 398 Modular Budget
  - PHS 398 Research Plan
  - PHS 398 Career Development Award Supplemental Form
  - PHS 398 Fellowship Supplemental Form
  - PHS 398 Checklist



# Features of the SF424 (R&R): Application Guide

- NIH has developed three, specific SF424 (R&R) Application Guides: 1) General Instructions; 2) General + SBIR/STTR 3) Fellowships.
- Includes instructions that are imbedded in the actual forms as well agency-specific instructions
- Agency-specific instructions denoted with the HHS Logo
- Application Guides are split into three parts:
  - Part I: Instructions for Preparing and Submitting an Application
  - Part II: Supplemental Instructions for Preparing the Human Subjects Section of the Research Plan
  - Part III: Policies, Assurances, Definitions





# Accessing Application Forms

- ***Find*** a grant opportunity in Grants.gov or the NIH Guide to Grants and Contracts.
- Click on “Apply for Grant Electronically” button in the Funding Opportunity Announcement (FOA).
- FOA will link to Grants.gov where applications and instructions are available for download.
- In Grants.gov, use the FOA number for searching and confirming you are responding to the correct announcement

Save & Submit

Save

Print

Cancel

Check Package for Errors



# Grant Application Package

Opportunity Title:	Recovery Act Limited Competition: NIH Challenge Grants
Offering Agency:	National Institutes of Health
CFDA Number:	93.701
CFDA Description:	Trans-NIH Recovery Act Research Support
Opportunity Number:	RFA-09-09-003
Competition ID:	ADOBE-FORMS-A
Opportunity Open Date:	03/27/2009
Opportunity Close Date:	04/27/2009
Agency Contact:	Grants Info Grants Information E-mail: GrantsInfo@nih.gov Phone: 301 435 0714

Header Information  
Pre-filled from announcement

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

Application Filing Name:

### Mandatory Documents

- PHS 398 (R & R)
- Research & Related Senior/Key Person Profile (E)
- Research & Related Other Project Information
- Research & Related Project/Performance Site Loc
- Research & Related Budget
- PHS 398 Cover Page Supplement
- PHS 390 Research Plan

Move Form to Complete



Move Form to Delete



Move Form to Submission List



### Mandatory Documents for Submission

Open Form

### Optional Documents

- PHS 398 Cover Letter File
- R & R Subaward Budget Attachment(s) Form

### Optional Documents for Submission



# Navigating Application Forms

- The **Grant Application Package Screen** provides access to all appropriate forms, both components that are required (mandatory) and those that are optional.
  - Some forms listed as optional are actually mandatory. For example, both modular budget forms and R&R budget forms are listed as optional, though you must submit at least one (but never both).
- Click on form and move it to submission box, then open to fill in application information.
- Fields highlighted in red, and shaded in yellow, are mandatory!

APPLICATION FOR FEDERAL ASSISTANCE  
SF 424 (R&R)

2. DATE SUBMITTED		Applicant Identifier	
3. DATE RECEIVED BY STATE		State Application Identifier	
1. TYPE OF SUBMISSION <input type="checkbox"/> Pre-application <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application		4. Federal Identifier	
5. APPLICANT INFORMATION * Legal Name: _____ Department: _____ Division: _____ * Street1: _____ Street2: _____ * City: _____ County: _____ * State: _____ Province: _____ * Country: USA: UNITED STATES * ZIP / Postal Code: _____		* Organizational DUNS: _____	
Person to be contacted on matters involving this application Prefix: _____ * First Name: _____ Middle Name: _____ * Last Name: _____ Suffix: _____ * Phone Number: _____ Fax Number: _____ Email: _____			
6. * EMPLOYER IDENTIFICATION (EIN) or (TIN): _____			
7. * TYPE OF APPLICANT: _____ Please select one of the following Other (Specify): _____ Small Business Organization Type: <input type="checkbox"/> Women Owned <input type="checkbox"/> Socially and Economically Disadvantaged			
8. * TYPE OF APPLICATION: _____ If Revision, mark appropriate box(es). <input type="checkbox"/> New <input type="checkbox"/> Resubmission <input type="checkbox"/> A. Increase Award <input type="checkbox"/> B. Decrease Award <input type="checkbox"/> C. Increase Duration <input type="checkbox"/> D. Decrease Duration <input type="checkbox"/> Renewal <input type="checkbox"/> Continuation <input type="checkbox"/> Revision <input type="checkbox"/> E. Other (specify): _____ * Is this application being submitted to other agencies? Yes <input type="checkbox"/> No <input type="checkbox"/> What other Agencies? _____			
9. * NAME OF FEDERAL AGENCY: National Institutes of Health		10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: 93-701 TITLE: Trans-NHR Recovery Act Research Support	
11. * DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: _____			
12. * AREAS AFFECTED BY PROJECT (cities, counties, states, etc.) _____		13. PROPOSED PROJECT: * Start Date _____ * Ending Date _____	
		14. CONGRESSIONAL DISTRICTS OF: a. * Applicant _____ b. * Project _____	
15. PROJECT DIRECTOR/PRINCIPAL INVESTIGATOR CONTACT INFORMATION Prefix: _____ * First Name: _____ Middle Name: _____ * Last Name: _____ Suffix: _____ Position/Title: _____ * Organization Name: _____ Department: _____ Division: _____ * Street1: _____ Street2: _____ * City: _____ County: _____ * State: _____ Province: _____ * Country: USA: UNITED STATES * ZIP / Postal Code: _____ * Phone Number: _____ Fax Number: _____ * Email: _____			

SF424 (R&R)

Cover Component

Page 1



# Notes on SF424 (R&R) Cover Component – Page 1

- Always start with the Cover Component. Information entered here pre-populates other components
- General information about the applicant organization, contact information for the PD/PI and Authorized Organizational Representative
- **Item 1, Type of Submission**
  - Pre-application—instructed not to use unless specifically noted in FOA
  - Changed/Corrected Application— Only use when correcting an application that failed system validations. This is NOT a resubmission.
- **Item 5, Organizational DUNS** must match DUNS in eRA Commons profile.



# SF424 (R&R)—A Cover Component: A Few Data Issues

- **Item 8, Type of Application-**
  - **New** is an application submitted for the first time
  - **Resubmission** is a revised or amended application
  - **Renewal** is equivalent to a Competing Continuation
  - **Continuation** is equivalent to a Progress Report. For the purposes of NIH and other PHS agencies, the box for Continuation will **not** be used and should **not** be checked.
  - **Revision** is somewhat equivalent to a Competing Supplement
- **Item 14, Congressional District** will be moving to the R&R Project/Performance Site Locations form in near future.

<b>18. ESTIMATED PROJECT FUNDING</b> a. * Total Estimated Project Funding <input type="text"/> b. * Total Federal & Non-Federal Funds <input type="text"/> c. * Estimated Program Income <input type="text"/>	<b>17. * IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b> <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE: <input type="text"/> <input checked="" type="checkbox"/> <b>NO</b> <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372; OR <input type="checkbox"/> PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
--	--

# SF424 (R&R)

## Cover Component

### Page 2

18. By signing this application, I certify (1) to the statements contained in the list of certifications\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances \* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

\* I agree

\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**19. Authorized Representative**

Prefix:  \* First Name:  Middle Name:   
\* Last Name:  Suffix:   
\* Position/Title:   
\* Organization:   
Department:  Division:   
\* Street1:   
Street2:   
\* City:  County:   
\* State:  Province:   
\* Country:  USA: UNITED STATES \* ZIP / Postal Code:   
\* Phone Number:  Fax Number:   
\* Email:

\* Signature of Authorized Representative:  Completed on submission to Grants.gov  
\* Date Signed:  Completed on submission to Grants.gov

**20. Pre-application**

**21. Attach an additional list of Project Congressional Districts if needed.**



# Project/Performance Site Locations

**Project/Performance Site Primary Location**

Organization Name:

\* Street1:

Street2:

\* City:  County:

\* State:   Province:

\* Country:   \* ZIP / Postal Code:

---

**Project/Performance Site Location 1**

Organization Name:

\* Street1:

Street2:

\* City:  County:

\* State:   Province:

\* Country:   \* ZIP / Postal Code:

- Collects data for up to eight locations
  - More than 8 locations requires a text attachment
  - Format for the attachment available at <http://grants.nih.gov/grants/funding/424/index.htm>

## RESEARCH & RELATED Other Project Information

# Other Project Information

1. \* Are Human Subjects Involved?

Yes  No

1.a. If YES to Human Subjects

Is the IRB review Pending?  Yes  No

IRB Approval Date:

Exemption Number:  1  2  3  4  5  6

Human Subject Assurance Number:

2. \* Are Vertebrate Animals Used?

Yes  No

2.a. If YES to vertebrate Animals

Is the IACUC review Pending?  Yes  No

IACUC Approval Date:

Animal Welfare Assurance Number

3. \* Is proprietary/privileged information included in the application?

Yes  No

4.a. \* Does this project have an actual or potential impact on the environment?

Yes  No

4.b. If yes, please explain:

4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed?

Yes  No

4.d. If yes, please explain:

5.a. \* Does this project involve activities outside the U.S. or partnership with International Collaborators?

Yes  No

5.b. If yes, identify countries:

5.c. Optional Explanation:

6. \* Project Summary/Abstract

Add Attachment

Delete Attachment

View Attachment

7. \* Project Narrative

Add Attachment

Delete Attachment

View Attachment

8. Bibliography & References Cited

Add Attachment

Delete Attachment

View Attachment

9. Facilities & Other Resources

Add Attachment

Delete Attachment

View Attachment

10. Equipment

Add Attachment

Delete Attachment

View Attachment

11. Other Attachments

Add Attachments

Delete Attachments

View Attachments



# Other Project Information

- **Items 1 and 2, Human Subject Involvement and Vertebrate Animal Use** – Approval dates still provided as just-in-time information.
  - Check yes to “Is the IRB Review Pending” and “Is the IACUC Review Pending” even in process has not begun at time of submission.
- **Item 7, Project Narrative** – Use for the public health relevance section
- **Item 11, Other Attachments** – Only complete this item when requested in the FOA.

PROFILE - Project Director/Principal Investigator

Prefix:  \* First Name:  Middle Name:   
\* Last Name:  Suffix:   
Position/Title:  Department:   
Organization Name:  Division:   
\* Street1:   
Street2:   
\* City:  County:   
\* State:  Province:   
\* Country: USA: UNITED STATES \* Zip / Postal Code:   
\* Phone Number:  Fax Number:   
\* E-Mail:   
Credential, e.g., agency login:   
\* Project Role:  Other Project Role Category:   
\* Attach Biographical Sketch      
Attach Current & Pending Support

# Senior/Key Person Profile - Expanded

PROFILE - Senior/Key Person 1

Prefix:  \* First Name:  Middle Name:   
\* Last Name:  Suffix:   
Position/Title:  Department:   
Organization Name:  Division:   
\* Street1:   
Street2:   
\* City:  County:   
\* State:  Province:   
\* Country: USA: UNITED STATES \* Zip / Postal Code:   
\* Phone Number:  Fax Number:   
\* E-Mail:   
Credential, e.g., agency login:   
\* Project Role:  Other Project Role Category:   
\* Attach Biographical Sketch      
Attach Current & Pending Support



# Senior/Key Person Profile

- Captures personal profile information on PD/PI, key personnel, and other significant contributors.
- eRA Commons “Credential” mandatory for all PD/PIs
- Attach a Biographical sketch for each person. Format and samples are available from the SF424 (R&R) Forms Page.
- Do not attach “Current & Pending Support” unless requested in FOA. This will be requested later during the just-in-time process.
- Form captures PD/PI plus 39 others.
- Form can also be used for “Other Significant Contributors”



# Research and Related Budget - General Notes

- R&R Budget Form is one of two “optional” forms for submitting budget information
  - Modular budgets do not use these forms, but instead use a PHS 398 form.
  - See FOA and SF424 (R&R) Instruction Guide for when to use each type of budget form
- Provide information only for your own organization. Subawardees will complete a separate but identical form with their own information.
- Applicant prepares a detailed budget for *every* budget period
- A detailed Cumulative budget will be system-generated based on the budget period data.





# R&R Budget Sections A & B

Personnel separated into 2 sections:

- A. Senior/Key Person
  - Allows 8 as separate named individuals
  - Provide info on additional Senior/Key persons in a .pdf attachment
  - Provide time in “person-months” units, not percent effort
  - PD/PI field must be filled-in
- B. Other Personnel
  - Postdocs, Grad Students, Undergrads: Only the number of personnel is required (not specific names or responsibilities).
  - Provide more detail in Budget Justification
  - “Base Salary” can be left blank when applying but NIH will require the information before the grant is awarded.



# Additional Notes on Personnel

<b>R&amp;R Budget Form</b>	<b>Senior/Key Personnel</b>
Include only personnel employed by (e.g., receiving salary from) your organization.	Include all personnel considered senior or key, regardless of employer.
Consultants should not be included in Sections A or B, but in Section F, Line 3 (Consultants).	Consultants should be listed the same as all other personnel considered senior or key.
If effort is unknown include in Section B (e.g., some consultants or other significant contributors).	Effort commitments not relevant to this section.

ORGANIZATIONAL DUNS:

\* Budget Type:  Project  Subaward/Consortium

Enter name of Organization:

\* Start Date:  \* End Date:  Budget Period 1

# R&R Budget Sections C - E

## C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item \* Funds Requested (\$)

1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>
11. Total funds requested for all equipment listed in the attached file		<input type="text"/>
Total Equipment		<input type="text"/>

Additional Equipment:

## D. Travel

Funds Requested (\$)

1. Domestic Travel Costs ( Incl. Canada, Mexico and U.S. Possessions)	<input type="text"/>
2. Foreign Travel Costs	<input type="text"/>
Total Travel Cost	<input type="text"/>

## E. Participant/Trainee Support Costs

Funds Requested (\$)

1. Tuition/Fees/Health Insurance	<input type="text"/>
2. Stipends	<input type="text"/>
3. Travel	<input type="text"/>
4. Subsistence	<input type="text"/>
5. Other <input type="text"/>	<input type="text"/>

Number of Participants/Trainees Total Participant/Trainee Support Costs



# R&R Budget Sections C - E

- **Item C, Equipment** allows itemization of up to 10 pieces of equipment. If more, include total dollars in line 11 and provide details in the attachment.
- **Item D, Travel** separates Domestic and Foreign travel, but NIH continues to award as a single category.
- **Item E, Participant/Trainee Support Costs** not used unless requested in FOA.

Next Period



# R&R Budget Sections F - K

\* ORGANIZATIONAL DUNS:

\* Budget Type:  Project  Subaward/Consortium

Enter name of Organization:

Start Date:  \* End Date:  Budget Period 1

**F. Other Direct Costs** Funds Requested (\$)

1. Materials and Supplies	<input type="text"/>
2. Publication Costs	<input type="text"/>
3. Consultant Services	<input type="text"/>
4. ADP/Computer Services	<input type="text"/>
5. Subawards/Consortium/Contractual Costs	<input type="text"/>
6. Equipment or Facility Rental/User Fees	<input type="text"/>
7. Alterations and Renovations	<input type="text"/>
8. <input type="text"/>	<input type="text"/>
9. <input type="text"/>	<input type="text"/>
10. <input type="text"/>	<input type="text"/>
<b>Total Other Direct Costs</b>	

**G. Direct Costs** Funds Requested (\$)

**Total Direct Costs (A thru F)**

**H. Indirect Costs**

Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total Indirect Costs</b>			<input type="text"/>

Cognizant Federal Agency

(Agency Name, POC Name, and POC Phone Number)

**I. Total Direct and Indirect Costs** Funds Requested (\$)

**Total Direct and Indirect Institutional Costs (G + H)**

**J. Fee** Funds Requested (\$)

**K. \* Budget Justification**

(Only attach one file.)

- Include tuition remission in **Item F, Other Direct Costs**
- **Item F(5), Consortium Costs** is not auto-populated.
- **Next Period Button** at top of page not available until all required data fields in this component are completed, including the budget justification.

## R&R SUBAWARD BUDGET ATTACHMENT(S) FORM

Instructions: On this form, you will attach the R&R Subaward Budget files for your grant application. Complete the subawardee budget(s) in accordance with the R&R budget instructions. Please remember that any files you attach must be a PDF document.

[Click here to extract the R&R Subaward Budget Attachment](#)

Important: Please attach your subawardee budget file(s) with the file name of the subawardee organization. Each file name must be unique.

1) Please attach Attachment 1	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
2) Please attach Attachment 2	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
3) Please attach Attachment 3	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
4) Please attach Attachment 4	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
5) Please attach Attachment 5	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
6) Please attach Attachment 6	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
7) Please attach Attachment 7	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
8) Please attach Attachment 8	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
9) Please attach Attachment 9	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>
10) Please attach Attachment 10	<input type="text"/>	<a href="#">Add Attachment</a>	<a href="#">Delete Attachment</a>	<a href="#">View Attachment</a>



# R&R Subaward Budget Attachment Form

- Used for detailed budget from all consortium grantees
- Consortium grantee(s) must have correct software version installed
- Applicant sends the R&R budget component to the consortium grantee for completion; it is returned to the applicant; applicant attaches it in this component
- Allows up to 10 separate budget attachments
  - Provide one budget for each consortium grantee
  - If more than 10 consortium partners, include details for 11 and above as PDF documents in budget justification

\* Program Type (select only one)

SBIR     STTR  
 Both (See agency-specific instructions to determine whether a particular agency allows a single submission for both SBIR and STTR)

\* SBIR/STTR Type (select only one)

Phase I     Phase II  
 Fast-Track (See agency-specific instructions to determine whether a particular agency participates in Fast-Track)

**Questions 1-7 must be completed by all SBIR and STTR Applicants:**

<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 1. Do you certify that at the time of award your organization will meet the eligibility criteria for a small business as defined in the funding opportunity announcement?</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 2. Does this application include subcontracts with Federal laboratories or any other Federal Government agencies?                  * If yes, insert the names of the Federal laboratories/agencies:</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 3. Are you located in a HUBZone? To find out if your business is in a HUBZone, use the mapping utility provided by the Small Business Administration at its web site: <a href="http://www.sba.gov">http://www.sba.gov</a></p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 4. Will all research and development on the project be performed in its entirety in the United States?                  If no, provide an explanation in an attached file.                  * Explanation: <input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/></p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 5. Has the applicant and/or Program Director/Principal Investigator submitted proposals for essentially equivalent work under other Federal program solicitations or received other Federal awards for essentially equivalent work?                  * If yes, insert the names of the other Federal agencies:</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 6. Disclosure Permission Statement: If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>* 7. Commercialization Plan: If you are submitting a Phase II or Phase I/Phase II Fast-Track Application, include a Commercialization Plan in accordance with the agency announcement and/or agency-specific instructions.</p> <p>Attach File: <input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/></p>

# SBIR/STTR Information

## Page 1



# SBIR/STTR Information (Pages 1 and 2)

- **Item 1, Eligibility** – Applicants must meet SBIR/STTR eligibility requirements at time of award, not time of application.
- **Item 6, Disclosure Permission Statement** – Allows NIH to share contact information and project title to outside parties for possible collaborations or investments.
- **Item 7, Commercialization Plan** – Include as a PDF attachment.



# SBIR/STTR Information

## Page 2

### SBIR/STTR Information

#### SBIR-Specific Questions:

Questions 8 and 9 apply only to SBIR applications. If you are submitting ONLY an STTR application, leave questions 8 and 9 blank and proceed to question 10.

 Yes No

\* 8. Have you received SBIR Phase II awards from the Federal Government? If yes, provide a company commercialization history in accordance with agency-specific instructions using this attachment.

\* Attach File:

Add Attachment

Delete Attachment

View Attachment

 Yes No

\* 9. Will the Project Director/Principal Investigator have his/her primary employment with the small business at the time of award?

#### STTR-Specific Questions:

Questions 10 and 11 apply only to STTR applications. If you are submitting ONLY an SBIR application, leave questions 10 and 11 blank.

 Yes No

\* 10. Please indicate whether the answer to BOTH of the following questions is TRUE:

(1) Does the Project Director/Principal Investigator have a formal appointment or commitment either with the small business directly (as an employee or a contractor) OR as an employee of the Research Institution, which in turn has made a commitment to the small business through the STTR application process; AND

(2) Will the Project Director/Principal Investigator devote at least 10% effort to the proposed project?

 Yes No

\* 11. In the joint research and development proposed in this project, does the small business perform at least 40% of the work and the research institution named in the application perform at least 30% of the work?



# Agency-specific Components (*a.k.a.* *PHS 398 Components*)

- Form pages required in addition to standard SF 424, and included in the NIH form set:
  - PHS 398 Cover Letter File
  - PSH 398 Cover Page Supplement (*supplements the R&R Cover*)
  - PHS 398 Modular Budget
  - PHS 398 Research Plan
  - PHS 398 Career Development Award Supplemental Form
  - PHS 398 Checklist
- Allows NIH to collect information not provided to other research agencies.



# PHS 398 Cover Letter

Close Form

Print Page

About

## PHS 398 Cover Letter

OMB Number: 0925-0001  
Expiration Date: 9/30/2007

\*Mandatory Cover Letter Filename:

Add Cover Letter File

Delete Cover Letter File

View Cover Letter File

- A suggested format for cover letters is described in both SF424 (R&R) Application Guides

### 1. Project Director / Principal Investigator (PD/PI)

Prefix:  \* First Name:   
Middle Name:   
\* Last Name:   
Suffix:

\* New Investigator?  No  Yes

Degrees:

### 2. Human subjects

Clinical Trial?  No  Yes  
\* Agency-Defined Phase III Clinical Trial?  No  Yes

### 3. Applicant Organization Contact

Person to be contacted on matters involving this application

Prefix:  \* First Name:   
Middle Name:   
\* Last Name:   
Suffix:   
\* Phone Number:  Fax Number:   
Email:

\* Title:   
\* Street1:   
Street2:   
\* City:   
County:   
\* State:   
Province:   
\* Country: USA: UNITED STATES  \* Zip / Postal Code:

PHS 398

Cover Page  
Supplement

Page 1





# PHS 398 Cover Page Supplement Pages 1 and 2

- Companion forms to the (R&R) Cover Component providing NIH with additional needed information
- For the PI, includes **New Investigator** code & **Degree** fields
- Includes **Clinical Trial** and **Agency-Defined Phase III Clinical Trial** indicators
- For the Business Official Contact, includes complete contact information (*title & mailing address missing from section 5 of the R&R Cover*)
- Page 2 includes **Human Embryonic Stem Cells** item

Budget Period: 1

Start Date:

End Date:

**A. Direct Costs**

* Direct Cost less Consortium F&A	<input type="text"/>	* Funds Requested (\$)
Consortium F&A	<input type="text"/>	
* Total Direct Costs	<input type="text"/>	

# PHS 398 Modular Budget

**B. Indirect Costs**

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date

Total Indirect Costs

**C. Total Direct and Indirect Costs (A + B)**

Funds Requested (\$):

Budget Period: 2

Start Date:

End Date:

**A. Direct Costs**

* Direct Cost less Consortium F&A	<input type="text"/>	* Funds Requested (\$)
Consortium F&A	<input type="text"/>	
* Total Direct Costs	<input type="text"/>	

**B. Indirect Costs**

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date

Total Indirect Costs

**C. Total Direct and Indirect Costs (A + B)**

Funds Requested (\$):



# PHS 398 Modular Budget

- Alternative to the R&R Budget form that doesn't require detailed categorical information.
- Available to certain applicants requesting \$250,000 or less in Direct Costs per year.
- Applicants must request total direct costs in "modules" of \$25,000.
- Direct costs are separated from consortium F&A costs since these are not included in the \$250K limit.
- Cumulative Budget is system-generated
- Form requires budget Justification PDF text attachments for Personnel, Consortium and Other

# PHS 398 Research Plan

## 1. Application Type:

From SF 424 (R&R) Cover Page and PHS398 Checklist. The responses provided on these pages, regarding the type of application being submitted, are repeated for your reference, as you attach the appropriate sections of the research plan.

\*Type of Application:

New  Resubmission  Renewal  Continuation  Revision

## 2. Research Plan Attachments:

Please attach applicable sections of the research plan, below.

1. Introduction to Application	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
<small>(for RESUBMISSION or REVISION only)</small>				
2. Specific Aims	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
3. Background and Significance	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
4. Preliminary Studies / Progress Report	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
5. Research Design and Methods	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
6. Inclusion Enrollment Report	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
7. Progress Report Publication List	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

### Human Subjects Sections

Attachments 8-11 apply only when you have answered "yes" to the question "are human subjects involved" on the R&R Other Project Information Form. In this case, attachments 8-11 may be required, and you are encouraged to consult the Application guide instructions and/or the specific Funding Opportunity Announcement to determine which sections must be submitted with this application.

8. Protection of Human Subjects	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
9. Inclusion of Women and Minorities	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
10. Targeted/Planned Enrollment	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
11. Inclusion of Children	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

### Other Research Plan Sections

12. Vertebrate Animals	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
13. Select Agent Research	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
14. Multiple PI Leadership Plan	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
15. Consortium/Contractual Arrangements	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
16. Letters of Support	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
17. Resource Sharing Plan(s)	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

18. Appendix	<input type="button" value="Add Attachments"/>	<input type="button" value="Remove Attachments"/>	<input type="button" value="View Attachments"/>
--------------	--	---	---



# PHS 398 Research Plan

- Separate PDF attachments for each section
- Same formatting requirements in the PHS398 continue here—margins, page limits, etc
- Appendix Material
  - Allows up to 10 separate attachments
  - Will be stored separately in the eRA Grant Folder, not as a part of the main application grant image
  - Will be accessible to appropriate NIH staff and peer reviewers

**1. Application Type:**

From SF424 (R&R) Cover Page. The response provided on that page, regarding the type of application being submitted, is repeated here for your reference, as you attach the sections that are appropriate for this Career Development Award.

New  Resubmission  Renewal  Continuation  Revision

**2. Career Development Award Attachments:**

Please attach applicable sections, below.

Introduction (if applicable)

1. Introduction to Application      
(for RESUBMISSION applications only)

Candidate Information

2. Candidate's Background

3. Career Goals and Objectives

4. Career Development/Training Activities During Award Period

5. Training in the Responsible Conduct of Research

6. Mentoring Plan (when applicable)

Statements of Support

7. Statements by Mentor, Co-Mentors, Consultants, Contributors (as appropriate)

Environment and Institutional Commitment to Candidate

8. Description of Institutional Environment

9. Institutional Commitment to Candidate's Research Career Development

Research Plan

10. Specific Aims

11. Background and Significance

12. Preliminary Studies/Progress Report

13. Research Design and Methods

14. Inclusion Enrollment Report (for RENEWAL applications only)

15. Progress Report Publication List (for RENEWAL applications only)

Human Subject Sections

16. Protection of Human Subjects

17. Inclusion of Women and Minorities

18. Targeted/Planned Enrollment

19. Inclusion of Children

# Career Dev Award Attachments

- Candidate Info
- Statements of Support
- Environ/Inst Commitment
- Research Plan
- Human Subjects

**2. Career Development Award Attachments (continued):**

Other Research Plan Sections

20. Vertebrate Animals	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
21. Select Agent Research	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
22. Consortium/Contractual Arrangements	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
23. Resource Sharing Plan(s)	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>

Appendix (if applicable)

24. Appendix

**\*3. Citizenship:**

<input type="checkbox"/> U.S. Citizen or noncitizen national	<input type="checkbox"/> Permanent Resident of U.S. <i>(If a permanent resident of the U.S., a notarized statement must be provided by the time of award)</i>
<input type="checkbox"/> Non-U.S. Citizen with temporary U.S. visa	

# More CDA Attachments

- Other Research Plan Sections
- Appendix



# PHS 398 Career Development Award Supplemental Form

Same rules as PHS 398 Research Plan

- Separate PDF attachments for each section
- Formatting requirements – margins, page limits, etc. apply



# PHS 398 Research Plan: Helpful Hints

- Create as a single document using any word processing software. Separate only at the end before uploading
- **Do not** include headers or footers
- **Do** include a section heading as part of the text; i.e., Specific Aims, Background & Significance



# PDF Attachment Hints

- Do not scan paper documents. Instead, produce documents with word-processing software and then convert electronically to PDF.
- Use meaningful titles for file names
- Only use standard characters in file names: A-z, 0-9, Hyphen (-), Underscore ( \_ ).
- Disable write-protection features.
- A zero-byte attachment is an invalid PDF.

# PHS398

## Checklist Page 1

- Captures additional information on **Change of PI** and **Change of Institution**

- Captures data on **Inventions and Patents**

### 1. Application Type:

From SF 424 (R&R) Cover Page. The responses provided on the R&R cover page are repeated here for your reference, as you answer the questions that are specific to the PHS398.

\* Type of Application:

New  Resubmission  Renewal  Continuation  Revision

Federal Identifier:

### 2. Change of Investigator / Change of Institution Questions

Change of principal investigator / program director

Name of former principal investigator / program director:

Prefix:

\* First Name:

Middle Name:

\* Last Name:

Suffix:

Change of Grantee Institution

\* Name of former institution:

### 3. Inventions and Patents (For renewal applications only)

\* Inventions and Patents: Yes  No

If the answer is "Yes" then please answer the following:

\* Previously Reported: Yes  No

#### 4. \* Program Income

Is program income anticipated during the periods for which the grant support is requested?

Yes  No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period	*Anticipated Amount (\$)	*Source(s)
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

#### 5. Assurances/Certifications (see instructions)

In agreeing to the assurances/certification section 18 on the SF424 (R&R) form, the authorized organizational representative agrees to comply with the policies, assurances and/or certifications listed in the agency's application guide, when applicable. Descriptions of individual assurances/certifications are provided at: <http://grants.nih.gov/grantsfunding/424>

If unable to certify compliance, where applicable, provide an explanation and attach below.

Explanation:

# PHS398

## Checklist

### Page 2

- Captures additional information on sources of **Program Income**
- Allows PDF text upload if unable to certify compliance.

Save & Submit

Save

Print

Cancel

Check Package for Errors

NTS.GOV\*

# Grant Application Package

Opportunity Title:	Recovery Act Limited Competition: NIH Challenge G
Offering Agency:	National Institutes of Health
CFDA Number:	93.701
CFDA Description:	Trans-NIH Recovery Act Research Support
Opportunity Number:	RFA-OD-09-003
Competition ID:	ADOBE-FORMS-A
Opportunity Open Date:	03/27/2009
Opportunity Close Date:	04/27/2009
Agency Contact:	Grants Info Grants Information E-mail: GrantsInfo@nih.gov Phone: 301-435-0714

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

\* Application Filing Name:

### Mandatory Documents

Move Form to Complete

=>

Move Form to Delete

<=

### Mandatory Documents for Submission

Research & Related Senior/Key Person Profile (E)

Research & Related Budget

PHS 398 Cover Page Supplement

**PHS 398 Checklist**

Research & Related Other Project Information

SP424 (R & R)

Research & Related Project/Performance Site Loc

[Open Form](#)

### Optional Documents

Move Form to Submission List

=>

### Optional Documents for Submission

R & R Subaward Budget Attachment(s) Form

**PHS 398 Cover Letter File**



# Application Submission

- Save the final application document and click “Check Package for Errors” on Grant Application Package Screen
- Once all documents are properly completed are saved the “Submit and Save” button becomes active.
- Once submitted, verification and confirmation screens will appear, and applicants will receive a Grants.gov Tracking Number.
- Use the FOA number (from Grants.gov or the NIH Guide) for searching and confirming you are responding to the correct announcement

## Application Submission Verification and Signature

Opportunity Title: NIH SBIR Omnibus Solicitation (SAMPLE ONLY)

Offering Agency: NIH

CFDA Number: 83.887

CFDA Description: Vision Research

Opportunity Number: PA-08-SBIR

Competition ID:

Opportunity Open Date: 10/16/2006

Opportunity Close Date: 01/01/2008

Application Filing Name :

### Do you wish to sign and submit this Application?

Please review the summary provided to ensure that the information listed is correct and that you are submitting an application to the opportunity for which you want to apply.

If you want to submit the application package for the listed funding opportunity, click on the "Sign and Submit Application" button below to complete the process. You will then see a screen prompting you to enter your user ID and password.

If you do not want to submit the application at this time, click the "Exit Application" button. You will then be returned to the previous page where you can make changes to the required forms and documents or exit the process.

If this is not the application for the funding opportunity for which you wish to apply, you must exit this application package and then download and complete the correct application package.

Sign and Submit Application

Exit Application



# After Submission

- After submission, the **eRA system** will:
  - Assemble the grant image
  - Generate a Table of Contents
  - Include headers (PI name) & footers (page numbers) on all pages
  - Perform agency validations
- Any errors must be fixed and the application resubmitted before it can be accepted for review.
- Warnings may not require fixing, but highlight potential problems/issues for applicants to consider.
- Applicants have a two-day viewing window after successful receipt (no errors) by NIH to ensure the application was submitted correctly.

**424 R&R and PHS-398 Specific  
Table of Contents**

*Page Numbers*

<b>SF 424 R&amp;R Face Page</b>	<u>1</u>
<b>Table of Contents</b>	<u>3</u>
<b>Research &amp; Related Project/Performance Site Location(s)</b>	_____
Additional Locations	_____
<b>Research &amp; Related Other Project Information</b>	_____
Project Summary/Abstract (Description)	_____
Public Health Relevance Statement	_____
Bibliography & References Cited	_____
Facilities & Other Resources	_____
Equipment	_____
<b>Research &amp; Related Senior/Key Person</b>	_____
Biographical Sketches for each listed Senior/Key Person	_____
Additional Senior/Key Person Profiles	_____
Additional Biographical Sketches	_____
<b>Research &amp; Related Budget – Year 1</b>	_____
<b>Research &amp; Related Budget – Year 2</b>	_____
<b>Research &amp; Related Budget – Year 3</b>	_____
<b>Research &amp; Related Budget – Year 4</b>	_____
<b>Research &amp; Related Budget – Year 5</b>	_____
<b>Research &amp; Related Budget – Cumulative Budget</b>	_____
<b>Research &amp; Related Consortium Budget</b>	_____





**PHS 398 Career Development Award Supplemental Form**

- Introduction to Application \_\_\_\_\_
- Candidate’s Background \_\_\_\_\_
- Career Goals and Objectives \_\_\_\_\_
- Career Development Training Activities During Award Period \_\_\_\_\_
- Training in the Responsible Conduct of Research \_\_\_\_\_
- Mentoring Plan \_\_\_\_\_
- Statement by Mentor, Co-mentor(s), Consultants, Contributors \_\_\_\_\_
- Description of Institutional Environment \_\_\_\_\_
- Institutional Commitment to Candidate’s Research Career Development \_\_\_\_\_
- Specific Aims \_\_\_\_\_
- Background and Significance \_\_\_\_\_
- Preliminary Studies/Progress Report \_\_\_\_\_
- Research Design and Methods \_\_\_\_\_
- Inclusion Enrollment Report \_\_\_\_\_
- List of Publications \_\_\_\_\_
- Protection of Human Subjects (Includes Data & Safety Monitoring Plan) \_\_\_\_\_
- Inclusion of Women and Minorities \_\_\_\_\_
- Targeted/Planned Enrollment Table \_\_\_\_\_
- Inclusion of Children \_\_\_\_\_
- Vertebrate Animals \_\_\_\_\_
- Select Agent Research \_\_\_\_\_
- References Cited \_\_\_\_\_
- Consortium/Contractual Arrangements \_\_\_\_\_
- Resource Sharing Plan (Data Sharing and Model Organism Sharing) \_\_\_\_\_

**PHS 398 Checklist**

PHS 398 Specific Assurances/Certification Explanation \_\_\_\_\_

**Appendix**

\_\_\_\_\_



# Handy Tools and Final Thoughts



[Home](#)

[Electronic Application Process](#)

[Transition Timeline](#)

[Avoiding Common Errors](#)

[Frequently Asked Questions \(FAQs\)](#)

[Training](#)

[Resources](#)

[Finding Help](#)

[Site Map](#)

[eRA Commons](#)

[Intranet Link \(NIH Staff only\)](#)

## Electronic Submission

Paper No More, Use 424 (R&R)

[Subscribe to the latest eSubmission News!](#)

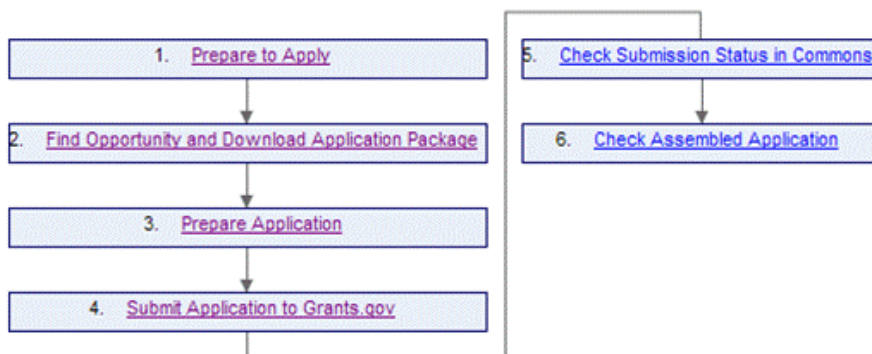


**All R01 Grant Applications Are Now Electronic**

[Resubmission, Revision, Renewal FAQs](#)

### Electronic Application Process

[View Process Flow Chart \(PDF - 23 KB\)](#)



### Transition Timeline

- [Timeline \(Graphic format\)](#)
- [More...](#)

### Avoiding Common Errors

- [Missing Commons User ID](#)
- [PDF Issues](#)
- [Total Cost does not equal direct and indirect costs](#)
- [More...](#)

### Frequently Asked Questions

- [Prepare to Apply FAQs](#)
- [Find Opportunity and Download Application Package FAQs](#)

### TIPS

- [PI](#) (PDF - 48 KB)
- [Small Biz](#) (PDF - 89 KB)
- [International](#) (PDF - 150 KB)

### Latest Updates

#### New Postings

- Updated [SF424 \(R&R\) Validations](#) posted (Oct. 26, 2007)
- Updated [SF424 \(R&R\) Application Guide \(MS Word - 2.75 MB\)](#) (Sept. 13, 2007)
- Updated [SBIR/STTR Application Guide \(MS Word - 3.02 MB\)](#) (Sept. 13, 2007)
- [eSubmission Overview \(PowerPoint - 1.99 MB\)](#) (June 20, 2007)

[More...](#)

#### Alerts

- [New Features and Fixes for eSubmission \(Oct. 26, 2007\)](#)
- [Resubmission, Revision, Renewal FAQs](#)
- [Options for Mac Users: Apr. 6, 2007](#)



## Forms &amp; Deadlines

## Forms &amp; Applications

[Submission Dates /  
Deadlines](#)
[Submitting Your  
Application](#)

## Global OER Resources

[Glossary & Acronyms](#)
[Frequently Used Links](#)
[Frequent Questions](#)

## SF424 (R&R) Application and Electronic Submission Information

The SF424 (R&R) is used for electronic submission gradually replacing the PHS 398. This page provides versions application guides and practice application packages for preparing your application. Also, see the [Electronic Submission of Grant Applications](#) page for more information.

One version of the application guide is currently available and is labeled as "Version 2 (to be used with applications packages indicating Version 2 or 2a)." This guide is to be used with funding opportunities using Version 2 of the SF424 (R&R) forms. These funding opportunities are clearly noted with a "VERSION-2-FORMS" or a "VERSION-2A-FORMS" in the "Competition ID" field of the forms package.

Version 2a includes the use of the Research and Related Senior/Key Person Profile (Expanded) form in place of the previously used Senior/Key Person form. The expanded form allows the collection of structured data for up to 40 Senior/Key Persons. The expanded form appears in all application packages posted on/after November 15, 2006 . This is the only change in the actual forms for packages noted as Version 2a.

NOTE: The sample application packages previously provided on this page have been removed. Prospective applicants are encouraged to review the [Parent Funding Opportunity Announcements](#) (FOAs) or a specific FOA to become familiar with an application package.

### Sections on this Page:

[ [Instructions and Other Information](#) ] [ [Additional Format Pages](#) ] [ [Notable Changes](#) ] [ [Contacts](#) ]

Instructions and Other Information	Date Posted	MS Word File	PDF File
Instructions: Version 2 (including 2a) (To be used for FOAs clearly noted with "VERSION-2-FORMS" or "VERSION-2A-FORMS" in "Competition ID" field of SF424 (R&R) forms package.)			
Grants.gov Application Guide SF424 (R&R) - <b>Version 2</b>	09/13/2007	<a href="#">MS Word</a> (2.8 MB)	<a href="#">PDF</a> (2.4 MB)
Grants.gov SBIR/STTR Application Guide SF424 (R&R) - <b>Version 2</b>	09/13/2007	<a href="#">MS Word</a> (3 MB)	<a href="#">PDF</a> (2.6 MB)
Other Information			
eRA Assembly of the SF424(R&R) Application ( <b>Version 2 - including 2a</b> ) (An informational document describing the system-generated grant image of a SF424 (R&R Application) once submitted and received by the agency)	01/29/2007	<a href="#">MS Word</a> (79 KB)	n/a



# Training Tools:

- Registration in the eRA Commons Demo  
[http://era.nih.gov/virtualschool/external/c101\\_GranteeRegistrationProcess.htm](http://era.nih.gov/virtualschool/external/c101_GranteeRegistrationProcess.htm)
- Grants.gov's How to Complete An Application Package Demo  
[http://www.grants.gov/flash/AdobeReaderApplicationTutorial\\_skin.swf](http://www.grants.gov/flash/AdobeReaderApplicationTutorial_skin.swf)



# Other Tools

- SF424 (R&R) application guides, sample application packages and related resources  
<http://grants.nih.gov/grants/funding/424/index.htm>
- Frequently Asked Questions  
<http://era.nih.gov/ElectronicReceipt/faq.htm>
- Frequently Asked Questions re: Person months  
<http://grants.nih.gov/grants/policy/policy.htm#resources>
- Tips and Tools  
[http://era.nih.gov/ElectronicReceipt/tips\\_tools.htm](http://era.nih.gov/ElectronicReceipt/tips_tools.htm)
- Communications and Outreach resources (brochures, presentations, drop-in newsletter articles)  
<http://era.nih.gov/ElectronicReceipt/communication.htm>



# Finding Help:

- Review application instruction guide(s)
- Contact Grants Info:
  - Grants Info
  - Phone: 301-435-0714
  - 301-451-0088 (TTY)
  - Email [GrantsInfo@nih.gov](mailto:GrantsInfo@nih.gov)
- All other tools and resources are found at:  
<http://era.nih.gov/ElectronicReceipt/support.htm>



# Finding Help: Commons Registration & Validations

- If help is needed with the eRA Commons registration process for the applicant organization or PDs/PIs, or with the application validation process in the eRA Commons after submission through Grants.gov, contact:

eRA Commons help desk

Phone: 301-402-7469/866-504-9552 (Toll Free)

301-451-5939 (TTY)

Business hours M-F 7am-8pm EST

Email [commons@od.nih.gov](mailto:commons@od.nih.gov)

Enter your own  
help ticket!

**Web support:** <http://ithelpdesk.nih.gov/eRA/>



- Also visit:

eRA Commons website:

<https://commons.era.nih.gov/commons/index.jsp>



# Collecting User Feedback

- NIH has established an e-mail address to collect comments and/or suggestions from users:

[NIHElectronicSubmiss@mail.nih.gov](mailto:NIHElectronicSubmiss@mail.nih.gov)

- Share your experiences—successes and challenges
- Share specific suggestions for improvement
- What resources are most useful (*Targeted e-mails, FAQs, Tips & Tools, Commons Alerts, Training tools*)



# Contact Information

Dave Curren – [CurrenD@mail.nih.gov](mailto:CurrenD@mail.nih.gov)

Pam Gilden – [GildenP@mail.nih.gov](mailto:GildenP@mail.nih.gov)

Grant Policy Inbox – [GrantsPolicy@OD.nih.gov](mailto:GrantsPolicy@OD.nih.gov)

THANK YOU!



# Questions?