Principal Investigator

Voelcker Fund Young Investigator Award on Basic and Translational Science

**Step 1 Pre-Proposal Application Cover Pages**

Send your complete application package (see page 2) to:

Emily Harrison Liljenwall, Max and Minnie Tomerlin Voelcker Fund,

153 Treeline Park, Suite 110 San Antonio, TX 78209

 OR emilyliljenwall@gmail.com

**Complete application packages must be received by December 5, 2022 4:00pm CST.**

**Project Title:** (Maximum 75 characters)

**Disease Area:** (choose one or more areas from the Disease of interest to the Voelcker Fund i.e. cancer, heart disease, arthritis, muscular dystrophy, retinitis and/or macular degeneration of the retina)

**Principal Investigator: Full Name, Degree(s):**

Current Appointment Title (e.g., Instructor, Assistant Professor):

Additional Current Job Title(s) (if any):

Institution:

Department:

Street Address:

City, State, Zip Code:

Telephone:       Fax:       E-mail:

Completion Date of Most Recent Fellowship:

First Faculty-level Appointment Title (e.g., Instructor or Assistant Professor):

First Faculty-level Appointment Date:       Institution:

All full-time **post**-fellowship Instructor-level positions will be considered full-time faculty-level appointments.

**Citizen of what country:**

**Permanent resident of what country-documentation must be provided:**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TENURE INFORMATION:**

Does your institution offer tenure?

 If yes, are you on the tenure-track?

 If yes, do you have tenure?

 *Principal Investigator*

**GRANTS AND CONTRACTS OFFICIAL TO NOTIFY IF AWARDED:**

Full Name:

Institution Name:

Title:

Department:

Street Address:

City, State, Zip Code:

Telephone:       Fax:       E-mail:

**Initial to acknowledge that the investigator has a full-time faculty-level appointment at your institution.**

## Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Date Submitted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MENTOR INFORMATION:**

Provide the following information for the mentor(s) who have submitted a letter of recommendation as part of this application package. Do **NOT** include information on mentors who have not submitted a letter.

**Mentor 1:**

Full Name, Degree

Title(s):

Institution:

Department:

**Mentor 2:**

Full Name, Degree

Title(s):

Institution:

Department:

## FORMATTING INSTRUCTIONS FOR PRE-PROPOSAL RESEARCH PLAN

 **Font:** Use 11 or 12-point font size throughout unless noted otherwise.

**Page Margins:** Page margins should not be smaller than 0.5 inches on all sides

**Page Limits:** Do not exceed the pages limits stated for each section.

**Appendices:** Do not attach any additional materials except as allowed.

**Pre-proposals should include: (1) This cover form: (2) A 2-page description of the proposed Project; and (3) a Letter of support from a Mentor; and (4) Biosketch using the NIH biosketch (nonfellowship) format downloadable at: [https://grants.nih.gov/grants/forms/biosketch.htm.](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=3&ved=2ahUKEwjyuI_otf7dAhWJt1kKHXhvAvgQFjACegQIBxAC&url=https%3A%2F%2Fgrants.nih.gov%2Fgrants%2Fforms%2Fbiosketch-blankformat.docx&usg=AOvVaw2bn0w-pmsvgIdTFztvplLs)**

**Applications that do not meet the page limits (including letters) and formatting instructions will not be accepted.**

**A COMPLETE PREPROPOSAL APPLICATION PACKAGE MAY BE SUBMITTED VIA EMAIL TO** **emilyliljenwall@gmail.com** **OR DELIVERED TO 153 TREELINE PARK, SUITE 110, SAN ANTONIO TEXAS 78209. ATTN EMILY HARRISON LILJENWALL**

If you have questions, please read the Frequently Asked Questions at **www.voelckerfund.org.** If your question is not answered there, please send an email to emilyliljenwall@gmail.com with "2023 Young Investigator" in the subject line.