Request for Research Proposals

Alopecia Areata Initiative Innovation Awards Program 2012

The Alopecia Areata Initiative (AAI) is pleased to announce a new Innovation Award funding opportunity. These awards will consist of \$200,000 in research support each year for two years, for a total individual award amount of \$400,000. The Alopecia Areata Initiative will fund a minimum of two Innovation Awards in the first funding cycle.

These awards will focus on funding the following area of interest: <u>Characterization of the human relapsing</u>, remitting disease process at the molecular and cellular level.

Characterization of the human alopecia areata disease process:

Although transcriptional profiling, GWAS and histologic studies have provided evidence that T cells and likely NKG2D-like ligands play a role in alopecia areata, a coherent understanding of the human alopecia areata disease process on a molecular and cellular level is lacking. The AAI is interested in supporting studies that provide insights into the immunologic events occurring in human alopecia areata, including but not limited to characterization of local cytokine production, T cell, NK cell and APC populations, and the expression of NKG2D-like ligands and other innate signals by the hair follicle. Studies should take into account the relapsing remitting nature of alopecia areata and include adequate control groups (for example, studies of lesional scalp and non-lesional scalp vs. healthy controls).

These awards will cover direct research costs only, will be two years in duration, and will provide \$200,000 per year in support. Reporting results and budget process will be discussed at the time of announcement of these awards.

Application Guidelines

- 1. **Eligibility:** Investigators representing non-profit academic research centers worldwide are eligible to apply. Investigators from for-profit companies are ineligible.
- 2. **Application form:** To be completed and included as the first 2 pages of the application packet. Signed copies of original scanned forms are acceptable. The application form template is included in this RFA.
- 3. Scientific Abstract: Briefly describe your proposed project in 200 words or less using technical language.
- 4. Research Proposal: The proposal should describe the research to which this award would be applied if funded. The proposal includes both the narrative text and any preliminary data in support of the proposal. It should not exceed five (5) pages in length. The five-page limit applies only to the body of the proposal and excludes a list of references, application form pages, budget page(s) and scientific abstract.
- 5. **Budget:** Include an annual budget for the proposal. **AAI will cover only direct costs.** The budget can be prepared using NIH Budget forms like PHS 398; however, use of these forms is not mandatory.
- 6. **CV and supportive publications:** Submit a maximum 4-page NIH Biosketch for each investigator. Include a list of relevant publications.
- 7. **Format:** Items 2– 6 (above) should be compiled and submitted as a single PDF file that begins with the signed and scanned cover pages.

Submit proposals electronically, included a scanned signature page to: alopeciarfa@gmail.com

Please direct questions regarding these proposals to: rclark1@partners.org

Rachael A. Clark, M.D., Ph.D. Department of Dermatology Brigham and Women's Hospital EBRC Room 505A 221 Longwood Avenue Boston, MA 02115 Fax (617) 264-5123

The deadline for applications is June 1, 2012. Funding decisions will be made through peer review by July 31st. Funding will begin September 1, 2012.

Alopecia Areata Initiative Innovation Awards Program 2012 Cover Page

1. Applicant Information							
Name							
Institution							
Department							
Street Address							
City	State						
Zip Code	Country						
Telephone		Fax	Email				
2. PROJECT INFORM	IATION						
Project Title							
Funding Fin Requested Ye		Second Year	Total				
Requested Ye	ai		10tai				
Are Human Subjects involved with this grant? Are Vertebrate Animals involved with this grant?							
Yes	No		Yes	No			
1 05	110		105				
If yes, Exemption Number If y			If yes, IACUC Approval D	Date			
Or IRB Approval Date			or Animal Welfare Assura	nce Number			
Assurance of Compliance Number							
3. RESEARCH ADMIN	NISTRATOR						
Name							
Title							
Institution							
Department							
Street Address							
City	State						
Zip Code	Country						
Telephone		Fax	Email				

4. FISCAL OFFICER

Name			
Title			
Institution			
Department			
Street Address			
City		State	
Zip Code	Country		
Telephone	Fax	Email	

5. CERTIFICATION AND SIGNATURES

The undersigned reviewed this application for an Alopecia Areata Initiative Innovation Award and are familiar with the policies, terms, and conditions of the AAI concerning this research support and accept the obligation to comply with all such policies, terms and conditions.

Applicant (Typed name)	Signature	Date
Officer Signing for Institution (Typed name and title)	Signature	Date
Fiscal Officer (Typed name and title)	Signature	Date