

EFSD and Lilly European Diabetes Research Programme

Research Grant Application

Deadline for submission of applications: 01 September 2023

Important! Please send your application as one complete PDF email attachment by 12:00 midday (CET) on the deadline date, to:
Foundation@easd.org

We only require an electronic version; please do not send paper copies.

You will receive an email acknowledging receipt of your application within three working days of submission. Should you have not received confirmation by then please contact the EFSD Office.

General Information:

- Unless specified otherwise, EFSD grant programmes are only open to applicants from single non-profit institutions or groups of such institutions from Europe and associated countries (for detailed country list, please see [here](#)).
- An application may be made by a principal investigator (PI) and up to two co-investigators. Principal investigators must be paid-up **EASD** members. Details on how to become a member can be found on the EASD website: www.easd.org. Applicants to all EFSD programmes must be paid-up members of EASD. For further information, please contact membership@easd.org.
- Application forms vary for each Programme, and are occasionally updated - it is therefore mandatory to download a new form for each application to be made. It is prohibited to remove sections or change the application form template. Incomplete applications will be rejected.
- It will be necessary for any current project supported by EFSD to be completed and a final scientific and financial report received, evaluated and approved by EFSD before new funding can commence. Applicants may apply for new funding three months prior to the termination of any grant project currently funded by EFSD.

- Grant activation documents must be returned to the EFSD Office within six months from the date of the EFSD award confirmation letter/email. In exceptional cases and with the prior written permission of the EFSD Office, this time period may be extended a further six months. Any funding which has not been activated within six months of the award confirmation letter/e-mail date (in exceptions twelve months) will be automatically withdrawn without any further notice.
- A list of all EFSD regulations can be found on the Programmes link of the EFSD website: www.EuropeanDiabetesFoundation.org.
- For further information, please refer to the Research Plan Guidelines which can be found at the end of this application form.

EFSD, Rheindorfer Weg 3, 40591 Düsseldorf, Germany
Foundation@easd.org

1. Applicant Information

Please note that EFSD will be contacting you by surface mail or email. Therefore, a complete postal address should be provided.

Important! The regulation regarding only one EFSD award being held at a time applies to Co-Investigators as well as PIs. It does not apply to collaborators. Co-Investigators are equal participants who are jointly responsible for the project, whilst collaborators have a smaller input relating to one aspect of the project. Please make sure that your Co-Investigators are aware of this EFSD regulation and that this applies even if they do not receive any funds from this proposal in case of a successful application.

Principal Investigator (PI):

Title (Dr, Prof): _____

First/Second Name: _____

Institution name (anglicised version): _____

Postal address (anglicised version): _____

Telephone (direct extension, **no** switchboard): _____

E-mail: _____

EASD Membership No: (Mandatory) _____

If applicable:

Co-Investigator 1:

(Title and Name): _____

Institution name (anglicised version): _____

Postal address (anglicised version): _____

Telephone (direct extension, **no** switchboard): _____

E-mail: _____

Co-Investigator 2:

(Title and Name): _____

Institution name (anglicised version): _____

Postal address (anglicised version): _____

Telephone (direct extension, **no** switchboard): _____

E-mail: _____

Note: A letter must be provided from any collaborators on the project – for further information and specific requirements please consult the Research Plan Guidelines, which can be found at the end of this application form.

2. Application Details

Title of proposal: (**max** 100 characters) – except where appropriate, please use lower case

Total budget requested: **Euro** _____

This project is: Clinical ☐ Basic ☐

Project Period: Months

From (month / year): _____ To: _____

3. Signatures and Declaration

Responsible financial officer to whom funds should be sent and who will keep a full account of disbursements (This is required from the PI's institution only).

All funds will be transferred from EFSD accounts. EFSD is a non-profit entity registered at the District Government Düsseldorf, Germany. The industry collaborators are not involved in the review process or decision on the grant awardees and they will have no rights to the results obtained from any funded research project. Therefore, funding through EFSD should not be subject to VAT.

Officer Name (Full name): _____

Title: _____

Signature: _____

Grant payable to (Institution Name only): _____

Telephone (direct extension, **no** switchboard): _____

E-mail: _____

Declaration: *We the undersigned declare that the information submitted is accurate and complete (to the best of our knowledge,) and that we shall accept the EFSD Regulations as stated on the Programmes section of the EFSD website if this application is funded. We further confirm that all staff grading and salaries quoted are correct and in accordance with the normal practice of this institution.*

Principal Investigator Assurance: *The undersigned agrees to accept responsibility for the scientific and technical conduct of the research project.*

Signature PI: _____

Signature & Stamp of Administrative official e.g., Dean, Head of Department for PI:

Signature Co-Investigator 1:

Signature Co-Investigator 2:

Note: If signatures cannot be obtained prior to submission of the application, this page may be sent up to 5 working days after the Programme deadline date. A scan of the originally signed page will suffice.

Applicant:

**4. Scientific Abstract – EFSD and Lilly European Diabetes
Research Programme 2023**

PROJECT TITLE:
(max. 100 characters)

PI – NAME:

PI – INSTITUTION:

Do not exceed **300 words** in type no smaller than 12 point Arial and keep the abstract dedicated to this page:

5. Biographical Sketch:

This part must not exceed 3 pages per investigator in Arial 12 point, single line spacing. List your education and employment in **reverse chronological order**. List in reverse chronological order the titles of and complete references to all publications during the past three years. Please also list earlier publications pertinent to this application. If a complete list of publications exceeds the three-page limit, you should choose those most pertinent to this application.

Biosketches are only necessary for the PI and co-investigators (if appropriate).

Date and place of birth: _____

Education

Name / location of college or university: _____

Highest degree: _____

Year conferred: _____

Field of study: _____

Research and/or professional experience:

6. Financial Support

IMPORTANT: Please be aware that EFSD does not support a principal investigator or co-investigator with more than one EFSD award at any given time, whether or not the projects are in related fields and independent of the EFSD programme providing the respective funding. It will therefore be necessary for all investigators to have completed the current project supported by EFSD and have submitted a final scientific report before any new funding can commence. Furthermore, the current award must be nearing completion (within six months) in order for any new application to be considered. Collaborators are exempt from this regulation.

List ALL financial support (current or approved for funding). Give complete titles of all grants as well as total award (in Euro, regardless of budget currency), funding dates, the role of the applicant and per cent of time devoted to each grant. Attach the abstract page of all sources of support (pending or current).

(Consecutively number any attachments for this section.)

Is support for this or another project being sought elsewhere or from another EFSD programme?

Yes: ☐ No: ☐

If yes, from which agencies? List below the titles of the project(s), total funding requested, and specify areas where there are overlaps in budget requests. Also, indicate the expected starting date for funding. For other EFSD applications please mention the programme name. **If support for this project is obtained from other sources and funds are claimed more than once for the same purpose, any funds awarded by EFSD will be withdrawn.**

Have you previously received support as Principal Investigator through an EFSD award?

Yes: ☐ No: ☐

If yes, please provide the following information for each award:

Name of EFSD programme making the award: _____

Title of project: _____

Project start date: _____ Projected finish date: _____

Final Report submitted:

Yes: ☐ No: ☐

Is the present application for competitive renewal of an existing EFSD award?

Yes: ☐ No: ☐

Note: No investigator may hold more than one EFSD grant at a time, and this may create a problem when a second investigator wishes to apply for EFSD support from within an institution or study group which already holds an active EFSD grant. Such applications will only be considered if the principal investigator named for this grant can provide clear evidence that he or she is a fully independent researcher.

Is any other scientist in your group currently supported by EFSD or are you a named investigator on any current EFSD award to your own or another institution?

Yes: ☐ No: ☐

If **yes**, please provide the following information:

Name of Principal Investigator: _____

Your role if any in the project: _____

Percentage of your time spent on the project: _____

Title of project: _____

Date of start of project: _____

Date of end of project: _____

Name of EFSD programme making the award: _____

If **Yes**, the below Statement must be signed by both the PI of this application and the current grant holder.

I hereby confirm that the PI on the current application will appear either as first or last author on any publications arising from the work that may be funded by EFSD, and that any existing grant holder will NOT feature as first or last author on any such publications.

Applicant (Full name): _____

Signature: _____

Current Grant Holder (Full name): _____

Programme Title: _____

Signature: _____

Which experiments/measurements will be performed in the PI's institution?

Which experiments/measurements will be performed in each of the collaborators' institution(s)?

Percentage of work to be carried out by:

PI _____ Co-Investigator 1 _____ Co-Investigator 2 _____

7. Ethical Approval

Will your project involve experiments requiring ethical approval/s?

Yes: ☐ No: ☐

Should this application result in the granting of an award, a copy of the ethical human and/or animal approval/s will need to be attached to the grant activation documentation.

Please do not attach approvals to this application form.

The approval/s must conform to the national laws of the country where the research is to be carried out.

Note: No payments will be transferred until the appropriate approval/s have been granted and a copy received in the EFSD Office.

8. Budget

A detailed budget must be provided on the following pages (please complete all parts of the forms). The budget period (time) during which the sum requested will be spent according to the specific needs of the project must be clearly stated and justified where indicated. **Please state your costs in Euros.** If you are applying from a country outside the Euro Zone, please convert your local currency into Euros, using the exchange rate on the date of your application.

Total budget period (in months): _____

Note: The budget submitted must match the total being requested from EFSD – if the sum requested is part of a larger overall costing, then this may be explained in the budget justification section.

Budget A

A – Personnel costs:				
Name	Role on project	% Effort on project and duration	Institutional base salary/year	Salary ¹
Subtotal Euro:				
Subtotal foreign currency (if applicable) ² :				
B – Supplies (please describe):				
Each individual purchase from 20,000 Euro ³				
Purchases up to 20,000 Euro ³				
			Subtotal Euro _____	
			Subtotal foreign currency _____	
C – Equipment (please describe) ³ :				
			Subtotal Euro _____	
			Subtotal foreign currency _____	
D – Other costs (please describe) ³ :				
			Subtotal Euro _____	
			Subtotal foreign currency _____	

¹ Gross salary including social charges, fringe benefits. The salary requested may not exceed (% effort) x (gross salary for the time period of the project).

² Type of foreign currency (e.g., £, DKK, CHF, SEK).

³ List individually.

Applicant:

E – Consultant/contractual costs ⁴ :	
Subtotal Euro _____	
Subtotal foreign currency _____	
SUBTOTAL DIRECT COSTS Euro _____	
INDIRECT COSTS (max. 10%) ⁵ Subtotal Euro _____	
Subtotal foreign currency _____	
TOTAL COSTS Direct (A-E) + indirect costs	TOTAL Euro _____

Contractual costs:

Please fill out this page for any contractual costs (i.e., work carried out at another institution or company) requested in the detailed budget A. **If none, do not fill out this page.**

From (month/year): _____ To: _____

⁴ List any consultant/contractual costs from Budget B (i.e., work carried out at another institution or company).

⁵ Indirect costs are pro-rata expenses that are not directly attributable to a project but are incurred in direct connection with direct eligible project costs. EFSD allows the recovery of up to 10% indirect costs, especially but not limited to: administrative expenses in relation to the project, such as accounting, administration related to payment of salaries and purchasing, recruitment, as well as auditing and financial reporting on the project, administration related to laboratories, their maintenance, upkeep and modernisation etc. No indirect costs are covered that are not related to the project or not related to the non-profit purpose of the EFSD.

Applicant:

Budget B - contractual costs

A – Personnel costs:				
Name	Role on project	% Effort on project and duration	Institutional base salary/year	Salary ¹
Subtotal Euro:				
Subtotal foreign currency (if applicable) ² :				
B – Supplies (please describe):				
Each individual purchase from 20,000 Euro ³				
Purchases up to 20,000 Euro ³				
			Subtotal Euro _____	
			Subtotal foreign currency _____	
C – Equipment (please describe) ³ :				
			Subtotal Euro _____	
			Subtotal foreign currency ⁶ _____	
D – Other costs (please describe) ³ :				
			Subtotal Euro _____	
			Subtotal foreign currency _____	
SUBTOTAL DIRECT COSTS ⁷			Euro _____	

⁶ Also list equipment costs under Equipment on previous page.

⁷ Enter sub-total direct costs under Consultant/Contractual Costs (Budget A, E) on previous page.

Applicant:

9. Budget justification:

Please provide a justification for each item listed in the budget including contractual costs (Budget B), as well as for the expected duration (time in months) of the project. This budget justification will be reviewed carefully and the Programme Board, on advisement from the Review Committee, may on occasion and at its discretion recommend an award in a lesser amount considered more appropriate for the proposed studies.

10. RESEARCH PLAN GUIDELINES: 8 page limit for sections a) to f): see below

General considerations

- A clear relationship to diabetes (and to any specific focus of a particular call for applications) must be obvious.
- Ensure that the sections in the proposal are balanced in length (see suggested page lengths below): a long introduction leaving too little space for preliminary data and a detailed work plan will decrease the chances of success.
- The review panel will consider the information provided as an example of the principal investigator's approach to a research objective and as an indication of ability in this area of research.
- Provide clear justification for each budget item. This will allow the reviewers to determine whether the budget is appropriate for the proposed work. It might be helpful to explain local funding policies underlying certain requests.
- Be completely open about support from other sources, including support from pharmaceutical industry. If the project is already supported from other sources, please explain this in detail and justify the additional/complementary resources requested.
- If you have applied unsuccessfully to any EFSD programme with this project previously, you are required to attach a copy of the feedback to this application if applicable. Furthermore, please provide proof in the narrative text on how you have incorporated the comments to improve your project plan.
- **Note the page limit of 8 pages total for parts 10 a-f of the Research Plan, including preliminary data** (Figures and Tables), but excluding collaborative arrangements, references and abstracts of other grants. No additional material (such as manuscript reprints, appendices etc.) will be accepted. Any application exceeding this page limit will be returned without review. The text must be written **in type no smaller than 12-point Arial with single line spacing**.

a. Introduction (suggested length 1-2 pages)

- 1) Objective
 - 2) Background and current status of research in the proposed field of study that has led to this proposal.
- Be careful and honest in describing the background literature (work from others).
 - It is important that the reader gets a feel for novelty. Which gap in knowledge is being filled by the proposal?
 - Hypothesis: A carefully crafted introduction/background will make the formulation of the hypothesis obvious. This should be formulated as precisely and distinctly as possible. Is it novel? Is it important? If the study is hypothesis-free or descriptive, this must be justified.

b. Specific aims for the period of requested support (suggested length ¼ page)

- Must succinctly describe the approach to test the hypothesis.
- Too many aims may give the impression of fragmentation.

c. Preliminary data (suggested length 2-3 pages)

- This is an important part of the application that will provide evidence to reviewers of the rationale and feasibility of the proposed experiments.
- Refer briefly to any of your own previously published work that is directly relevant to the proposed experiments.
- Describe relevant new experiments and provide unpublished preliminary data in the form of figures or tables.

d. Detailed plan of investigation with clearly set out project plan, methods, time plans with milestones and deliverables (suggested length 3-4 pages)

- Please state if a power analysis has been performed and provide details of same. If this is not the case, please explain why a power analysis is not applicable to the project.
- Does the work plan correspond to the aims in a direct fashion?
- Potential pitfalls: It is useful to openly discuss challenges or vulnerabilities to a certain approach and to elaborate on potential alternatives to give the feeling that the best way forward has been chosen.
- If the study is a clinical trial, all aspects of design must be carefully considered. It is helpful to ensure that appropriate expertise is represented in the proposal.

e. Novelty and importance of this work – relevance to the specific aims of this EFSD Research Programme if applicable (suggested length ½ page)

f. Facilities available (suggested length ½ page)

g. Collaborative arrangements.

A signed letter of confirmation from each collaborator is required. In addition to information which the collaborator feels is relevant to the application, this letter should contain the following sentence:

“I herewith confirm that I have read and agreed with the scientific protocol of this application. The application is feasible and includes novel aspects that will advance scientific knowledge in this field and that the protocol of this project is in accordance with the requirements outlined in the Announcement for this Programme”.

h. References (no page limit)

i. Abstract pages from all other sources of support (pending or current)