

of intent is required to obtain Applications and Instructions. See Policies document for method of application.

Contact: American Cancer Society, Inc. Extramural Grants Department, 1599 Clifton Road, NE, Atlanta, Georgia 30329-4251. Voice: (404) 329-7558 Fax: (404) 321-4669 Web site: <http://www.cancer.org> Email: grants@cancer.org

Deadline: none

COOLEY'S ANEMIA FOUNDATION, INC: RESEARCH FELLOWSHIP

Purpose: The Cooley's Anemia Foundation, Inc, invites national and international applications for 2002–2003 Research Fellowships available to both postdoctoral fellows and junior faculty members interested in the field of thalassemia. Applications on topics such as cardiac and endocrine complications of iron overload, bone marrow transplantation, iron chelation, and gene therapy are encouraged.

Term/Amount: The stipends will be \$40,000. Awards will be announced before June 1, 2002.

Contact: Applications available at: www.cooleysanemia.org. For further information, please contact: Cooley's Anemia Foundation, 129-09 26th Avenue #203, Flushing, NY 11354 Telephone: (718) 321-2873 Fax: (718) 321-3340 Email: info@cooleysanemia.org.

Deadline: The deadline for receipt of the application for Research Fellowships is March 4, 2002 (Monday).

CLINICAL TRIAL PLANNING GRANT: RFA-AR-02-001

Purpose: The purpose of the NIAMS Clinical Trial Planning Grant is to provide support for the organization of activities critical for the successful implementation of clinical trials in areas within the NIAMS mission. The planning grant is intended to (a) allow for early peer review of the rationale and design for high risk, complex, or large-scale clinical trials; (b) provide support for the development of a detailed clinical trial research plan, including a manual of operations and procedures, as a means of decreasing the long start-up time often needed for initiating large trials after award; and (c) provide support to refine critical components of a clinical trial, such as experimental design, analytical techniques, recruitment strategies, data management, and collaborative arrangements. The purpose of the NIAMS planning grant is not to obtain preliminary data nor to conduct studies to support the rationale for the clinical trial. Applicants should be aware that the award of a planning grant does not guarantee NIAMS acceptance of the full-scale clinical trial for peer review, nor subsequent funding of the trial following peer review. However, it is expected that the applicant will develop a full-scale clinical trial for submission to a public or private agency if the Clinical Trial Planning Grant is approved for funding.

Term/Amount: It is estimated that \$600,000 total costs will be available for support of this initiative. Direct costs will be awarded in modules of \$25,000, less any overlap or other necessary administrative adjustments. Facilities and Administrative costs will be awarded based on the negotiated rates. Awards are contingent on the availability of funds and the receipt of highly meritorious applications.

Contact: The letter of intent is to be sent to Tommy L. Broadwater, Ph.D. Scientific Review Branch National Institute of Arthritis and Musculoskeletal and Skin Diseases Natcher Building, Room 5AS-25U 45 Center Drive, MSC 6500 Bethesda, MD 20892-6500 Telephone: (301) 594-4952 FAX: (301) 480-4543 Email: broadwat@mail.nih.gov The PHS 398 research grant application instructions and forms (rev. 5/2001) at <http://grants.nih.gov/grants/funding/phs398/phs398.html> must be used in applying for these grants. This version of the PHS 398 is available in an interactive, searchable PDF format. For further assistance contact GrantsInfo, Telephone 301/435-0714, Email: GrantsInfo@nih.gov.

Deadline: Letter of Intent Receipt Date: February 22, 2002. Application Receipt Date: March 22, 2002.

EARLY CLINICAL TRIALS OF NEW ANTI-CANCER AGENTS WITH PHASE I EMPHASIS: RFA-CA-02-011

Purpose: The purpose of this Request for Applications (RFA) is to provide funding to assess novel agents available through the NCI in early clinical, dose finding trials. This initiative's major objective is the timely completion of trials of promising anti-cancer agents and combinations of agents to establish safe and biologically active treatment schedules for patients with cancer and to establish proof of principle for new agents directed at novel molecular targets. Most of these trials will include pharmacokinetic assessment. Many of these trials will include assessment of drug exposure and effect. These assessments may provide an understanding of the relationship between the drug's doses and schedules and its effects. This RFA invites investigators to form teams of investigators and support staff to propose, develop, perform and analyze the results of early clinical trials. These teams should include clinical investigators with expertise in the performance of early clinical trials, collaborating with researchers with expertise in clinical pharmacology and translational correlative studies as well as support staff. Single Institution Phase I studies are preferred, although laboratory studies may be conducted with collaborators at other institutions. Strong justification, evidence of well-established collaborations and clearly described procedures must be supplied for multi-institutional applications.

Term/Amount: The NCI intends to commit in FY2003 approximately \$7,200,000 including direct costs and costs for Facilities and Administration to fund 14-15 new and/or com-

peting continuation cooperative agreements in response to this RFA. An applicant may request a project period of up to five years. Because the nature and scope of the research proposed may vary, it is anticipated that the size of each award will also vary. The NCI policy that R01 and U01 applications cannot exceed an increase of 20% over the direct cost award level in the last non-competing (type 5) year does not apply to the applications received in response to this RFA. Although the financial plans of the NCI provide support for this program, awards pursuant to this RFA are contingent upon the availability of funds and the receipt of a sufficient number of meritorious applications.

Contact: The Letter of Intent is to be sent to Dr. Louise B. Grochow Chief, Investigational Drug Branch Cancer Therapy Evaluation Program Division of Cancer Treatment and Diagnosis National Cancer Institute Executive Plaza North, Room 7131 6130 EXECUTIVE BLVD MSC 7426 BETHESDA, MD 20892-7432 Telephone: (301) 496-1196 FAX: (301) 402-0428 E-mail: grochowl@ctep.nci.nih.gov The PHS 398 research grant application instructions and forms (rev. 5/2001) at <http://grants.nih.gov/grants/funding/phs398/phs398.html> must be used in applying for these cooperative agreements. This version of the PHS 398 is available in an interactive, searchable format. For further assistance contact GrantsInfo, Telephone 301/435-0714, Email: GrantsInfo@nih.gov.

Deadline: Letter of Intent Receipt Date: February 14, 2002. Application Receipt Date: March 21, 2002.

COOPERATIVE PLANNING GRANT FOR CANCER DISPARITIES RESEARCH PARTNERSHIP: RFA-CA-02-002

Purpose: The National Cancer Institute (NCI) invites cooperative planning grant applications (using the U56 mechanism) in an effort to strengthen the national cancer program by developing models to reduce significant negative consequences of cancer disparities seen in certain U.S. populations. This grant will support the planning, development and conduct of radiation oncology clinical research trials in institutions that care for a disproportionate number of medically underserved, low income, ethnic and minority populations but have not been traditionally involved in NCI-sponsored research. The grant will also support the planning, development and implementation of nurturing partnerships between applicant institutions and committed and experienced institutions actively involved in NCI-sponsored cancer research. All approaches to planning are encouraged, as long as they address the following essential features: a focus on cancer disparities, radiation oncology clinical research, institutional commitment, organizational capabilities, facilities, and interdisciplinary coordination and collaboration. At this time, NCI anticipates issuing another RFA for the establishment of

additional Cancer Disparities Research Partnerships in fiscal year 2003.

Term/Amount: NCI/RRP anticipates making up to three 5-year grant awards in fiscal year 2002. NCI also anticipates issuing another RFA for the establishment of additional CDRPs in fiscal year 2003. The NCI/RRP plans to set aside \$2.1 million for the initial year's funding that includes direct costs, costs for facilities and administration, and one-time capital equipment costs. Excluding one-time capital costs expended in the first year, applicants may request a budget for direct costs of up to an average of \$400,000 per year over the five years of the grant. Because the nature and scope of research and partnerships may vary, it is anticipated that the size of each award will also vary.

Contact: The letter of intent is to be sent to Referral Officer Division of Extramural Activities 6116 Executive Boulevard, Room 8109, MSC 8239 Rockville, MD 20852 (express service) Bethesda, MD 20892-8236 Telephone: (301) 496-3428 Fax: (301) 402-0275 Email: ncidearefof-r@mail.nih.gov The PHS 398 research grant application instructions and forms (rev. 5/2001) at <http://grants.nih.gov/grants/funding/phs398/phs398.html> must be used in applying for these grants. This version of the PHS 398 is available in an interactive, searchable format. For further assistance contact GrantsInfo, Telephone 301/435-0714, Email: GrantsInfo@nih.gov.

Deadline: Letter of Intent Receipt Date: February 6, 2002. Application Receipt Date: March 13, 2002.

GEORGE M. O'BRIEN KIDNEY RESEARCH CENTERS: RFA-DK-02-028

Purpose: This Request for Applications (RFA) invites investigators to submit research applications for the George M. O'Brien Kidney Research Centers Program. The emphases for this program are fourfold (1) to continue to attract new scientific expertise into the study of the basic mechanisms of kidney diseases and disorders; (2) to encourage multidisciplinary research focused on the causes of these diseases; (3) explore new basic areas that may have clinical research application; and (4) generate *Developmental Research (DR)/Pilot and Feasibility (P&F) studies of two years duration, which are anticipated will lead to new and innovative approaches to study kidney disease, and the eventual submission of competitive investigator-initiated R01 research grant applications. The mounting complexities associated with the studies of disease processes will likely require investigators who have training and expertise in disciplines such as cell and molecular biology, biochemistry, physiology, genomics and proteomics, epidemiology, immunology and pathology. In addition, appropriate expertise will likely include a focus into topical areas, such as diabetic nephropathy or other