

OFFICE OF HIGHER EDUCATION
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**REQUEST FOR PROPOSALS
MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN
INJURY
ANNUAL RESEARCH GRANT PROGRAM**

**Laws of Minnesota 2021
Chapter 64, Article 1, Section 2, Subd. 20**

DEADLINES

**Intent to Submit Form – March 4, 2022
Grant Proposal – April 15, 2022
Presentations – May 11, 2022**

Alternative Format:

Upon request, the Request for Proposals can be made available in an alternative format by contacting Alaina DeSalvo, Office of Higher Education, 1450 Energy Park Drive, Suite 350, St. Paul, MN 55108, phone (651) 259-3988, fax (651) 642-0675. TTY users should contact the Minnesota Relay Service at 1-800-627-3529 and request assistance in contacting the Office of Higher Education.

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM
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**REQUEST FOR PROPOSALS
MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM
FISCAL YEAR 2022**

February 8, 2022

Minnesota Office of Higher Education

I. OVERVIEW AND FUNDING AVAILABILITY

Minnesota 2015 Session Law, Chapter 69 directed the Commissioner of the Minnesota Office of Higher Education to establish a grant program for institutions in Minnesota for research into new and innovative treatments and rehabilitative efforts for the functional improvement of people with spinal cord and traumatic brain injuries. The Spinal Cord Injury and Traumatic Brain Injury Research Grant Program began on July 1, 2015 and continues to fund innovative research across Minnesota. Research areas may include, but are not limited to, pharmaceutical, medical device, brain stimulus, and rehabilitative approaches and techniques. See **Appendix A** for a description of the grant program and advisory council membership and duties.

Based on the annual allocation for this program, \$3,000,000 will be available each year of the 2022/2023 biennium to support the Spinal Cord Injury and Traumatic Brain Injury Grant Program. Three percent of this appropriation will be used for program administration.

The Commissioner of the Office of Higher Education, in consultation with the program's advisory council, shall award 50 percent of the available grant funds for research focused on spinal cord injuries and 50 percent to research focused on traumatic brain injuries. Should there be additional funding available for this grant cycle, it will be included in the total funds awarded and divided 50/50 by content area.

The overall objective of this program is to foster and encourage innovative research for treatment and rehabilitative techniques for spinal cord and traumatic brain injuries. In fiscal year 2022, three funding options are available through the Minnesota Office of Higher Education. Each tier, with maximum allowable request, allowable project time, and project requirements are listed below:

Tier 1: Pilot Project Grant

- Max Request: \$125,000.
- Project Time: 2 years + 1 year no-cost extension.
- Project Details: Reflects early investment as the researcher prepares to seek a larger grant award from a federal program or nonprofit organization. Preliminary data is not required.

Tier 2: Standard Research Grant

- Max Request: \$250,000.
- Project Time: 2 years + 1 year no-cost extension.
- Project Details: Primarily for research with supporting/preliminary data. If the budget is justifiable, the Standard Research Grant may also fund pilot projects. Applicants are encouraged to attach papers; in-press, pre-published drafts, and accepted papers may be cited or submitted separately as an appendix.

Tier 3: Clinical/Translational Research Grant

- Max request: \$500,000.
- Project Time: 3 years + 2 year no-cost extension.
- Project Details: Projects must have concurrent application or funding from federal or industry sources. Preliminary data must be published or in press in a scientific journal and cited or submitted separately as an appendix.

Please note: preference will go to projects that have received IDE approval prior to the time of proposal submission.

Spinal Cord Injury and Traumatic Brain Injury research proposals will be funded up to the maximum request per funding tier for the Fiscal Year 2022 grant period, which includes indirect costs set at 8% of total direct costs.

All applicants must be available on the day of the virtual proposal review (MAY 11, 2022) to give a five minute presentation on their proposed project and respond to reviewers' questions. A list of time slots will be sent to the applicants at least two weeks in advance.

II. ELIGIBLE GRANT APPLICANTS

Eligible grant applicants must be lead institutions/organizations located within Minnesota and fall into one or more of the following categories: public/state controlled institution of higher education; private institution of higher education; nonprofit with 501(c)(3) IRS status (other than institution of higher education); nonprofit without 501(c)(3) IRS status (other than institution of higher education); small business; and for-profit organization (other than small business).

Eligible principal investigators must have the skills, knowledge, and resources necessary to carry out the proposed research. This program is not for postdoctoral fellowships or residents (non-board eligible/board certified physicians); postdoctoral fellows and residents will not be considered as principal investigators. Post-doctorates, residents, or other individuals are eligible to be listed as key personnel or consultants. Collaborations are encouraged with Minnesota-based researchers as well as researchers located outside the state of Minnesota; however, the applicant-institution must reside within the state of Minnesota.

III. RESTRICTIONS

Successful proposals will be relative to the topic of spinal cord and brain injury and have high scientific merit.

Project periods will begin June 1, 2022 or the date that the contract is signed. The length of the project period will vary depending on the tier of the project.

The principal investigator must be affiliated with a Minnesota-based research institution/organization.

Organizations selected for a fiscal year 2022 award may have *limited to no input* on the State grant agreement. If you would like to review a sample grant agreement prior to submitting a proposal, or have any questions on what modifications to the contract are allowable, please contact Lain DeSalvo (alaina.desalvo@state.mn.us)

IV. FINANCIAL REVIEW PROCESS FOR NON-GOVERNMENTAL ORGANIZATIONS

All Non-Governmental Organizations (NGO's) applying for grants in the state of Minnesota must undergo a financial review prior to a grant award made of \$25,000 and higher. In order to comply with the [Policy on the Financial Review of Nongovernmental Organizations](#), please submit one of the following documents with your application, based on the following criteria:

- Grant applicants with an annual income of under \$50,000, or who have not been in existence long enough to have a completed IRS Form 990 or audit, should submit their most recent board-reviewed financial statements.
- Grant applicants with a total annual revenue of \$50,000 or more and less than \$750,000 should submit their most recent IRS Form 990.
- Grant applicants with a total annual revenue of over \$750,000 should submit their most recent certified financial audit.

V. PROPOSAL SUBMISSION

All applicants must be available on the day of the virtual proposal review (MAY 11, 2022) to give a five minute presentation on their proposed project and respond to reviewers' questions. A list of time slots will be sent to the applicants at least two weeks in advance.

Proposals must be submitted by **4:30 pm on April 15, 2022**. There is no limit to the number of proposals that an eligible applicant may submit.

Applicants **are required** to use the following format. The proposal must be self-contained within specified page limitations. Internet Web site addresses (URLs) may not be used to provide information necessary to the review, because reviewers are under no obligation to view the Internet sites. For the application, the following areas must be identified and addressed in the order shown.

1. Proposal Cover Sheet as the first page of the document. *Use Appendix B.*
2. Principal Investigator/Institutional Assurance Form. *Use Appendix C.*
3. Program Abstract summarizing the focus, delivery, and desired outcome of the proposed research. **The Program Abstract MUST be written in lay-persons terms and be accessible to a reviewer with little-to-no existing science knowledge.** *Use Appendix D.*
4. Table of Contents with pagination.
5. Research Plan not to exceed ten (10) numbered, double-spaced pages using 12-point Times New Roman font. Do not double space charts, tables, or graphs. This page limit excludes the documents reference in numbers 1-4 and numbers 6-11.

The Research Plan should address the project period and funding requested, show the scope of the overall project, and justify how the proposed research will provide new or innovative treatments and rehabilitative efforts for the functional improvement of people with spinal cord

and traumatic brain injuries. It should also include a justification as to why the project falls within the funding tier that was selected.

The Research Plan narrative should be structured in accordance with the following format:

Introduction: Provide an explicit description of how the proposed research will meet the goals of the research grant program. Review the most significant previous work, and describe the current status of research in the field. Document with references. Describe any preliminary work the principal investigator/collaborator has done which lead to this proposal.

Specific Aims: List the specific aims.

Procedural Methods: Give details of the research plan, including a description of the experiments or other work proposed; the methods, species of animals, and techniques to be used; the kinds of data expected to be obtained; and the means by which the data will be analyzed or interpreted. If clinical studies are involved, give details of responsibility for patient selection and patient care. Include a discussion of pitfalls that might be encountered and limitations of the procedures proposed. Point out any procedures, situations, or materials that may be hazardous to personnel and the precautions to be exercised. Describe the principal experiments or observations in the sequence in which they will be conducted, and indicate a tentative schedule of the main steps of the investigation.

Significance: Describe how the proposed project addresses a critical barrier to progress in the field. Discuss any new and innovative ideas and contributions that the project offers. Make clear the potential importance of the proposed project for stimulating further research or attracting federal grant support.

Facilities Available: Describe the facilities available for this project including laboratories, clinical resources, office space, animal quarters, etc. List major items of equipment available for the proposed work.

Collaborative Arrangements: If the proposed project requires collaboration with other investigators, describe the collaboration and provide evidence to assure the reviewers that the other collaborators agree (letters of support in the appendix).

6. Reference page citing research-based references that support proposed activities.
7. Budget and Budget Justification Pages. On the budget page, list the direct costs for all budget categories. Supplies and other costs must relate directly to performance of the projects. Indirect costs cannot exceed 8% of total direct costs. All costs must be specifically justified on the one page budget justification form. *Use Appendix E.*
8. Senior/Key Personnel Report. Provide required information for senior/key personnel. *Use Appendix F.*
9. Biographical Sketch of Principal Investigator and Senior/Key Personnel including his/her bibliographies (4-page maximum for each individual). *Use format of Appendix G.*
10. Other Grant Support for Principal Investigator and Senior/Key Personnel. Indicate current support relevant to the proposed project (three page maximum for each individual). *Use format of Appendix H.*

11. Additional appendices are allowed and may contain such items as letters of agreement from collaborators, letters of support, additional scientific materials, etc. **DO NOT** include the applicant institution's public relations or promotional materials.
12. Intent to Submit Proposal Form. So that OHE staff may plan for proposal review, return the INTENT TO SUBMIT form (*Appendix I*) by **March 4, 2022**. Intent to submit forms are not mandatory but highly suggested.

VI. PROPOSAL REVIEW CRITERIA

Despite three funding tiers, all proposals will be evaluated according to the following criteria:

1. Significance (*1-9 points*)
 - The proposed project addresses an important problem or a critical barrier to progress in the field.
 - If the aims of the project are achieved, scientific knowledge, technical capacity, and/or clinical practice will be improved.
 - Successful completion of proposed project aims will change the concepts, methods, technologies, treatment, or rehabilitative services that drive this field.
2. Innovation (*1-9 points*)
 - The proposal challenges and seeks to shift current research or clinical practice paradigms by using novel theoretical concepts, approaches or methodologies, instrumentation, or interventions.
 - A refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions is proposed.
3. Approach (*1-9 points*)
 - The overall strategy, methodology, and analyses are well-reasoned and appropriate to accomplish the specific aims of the proposed project.
 - Potential problems, alternative strategies, and benchmarks for successes are presented.
 - If the project is in the early stages of development, the proposed strategy will establish feasibility and manage particularly risky aspects of the proposed project.
 - If the project involves human subjects and/or NIH-defined clinical research, plans are in place for Protection of Human Subjects and inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion (or exclusion) of children, justified in terms of the proposed scientific goals and research strategy.
4. Investigator(s) (*1-9 points*)
 - The PI, collaborators, and other researchers are well suited for the project.
 - Early Stage Investigators or New Investigators have appropriate experience and training.
 - Established Investigators have demonstrated an ongoing record of accomplishments that have advanced their field(s).
 - If the project is collaborative or multi-PI, the investigators have complementary and integrated expertise and their leadership approach, governance, and organizational structure are appropriate for the project.

5. Appropriateness of Facilities/Environment (*1-9 points*)
 - The scientific environment in which the work will be done will contribute to the probability of success.
 - Institutional support, equipment and other physical resources available to the investigators are adequate for the proposed project.
 - The project will benefit from unique features of the scientific environment, subject populations, or collaborative arrangements.
6. Budget (*narrative evaluation comments only*)
 - The budget is clear, concise, and justified by the narrative describing proposed costs.
 - The budget is cost effective and reflective of the RFP and program objectives.

The assignment of points during the proposal review process will be reflective of National Institutes of Health guidelines.

Preference will go to projects that have prior IDE approval at the time of proposal submission.

VII. PROPOSAL REVIEW PROCESS

Upon receipt by OHE, proposals will be reviewed to determine if all required materials are included and if the proposal responds to program requirements. **Incomplete proposals, late proposals, proposals not responding to submission guidelines, and proposals from ineligible applicants will not be judged.**

Qualifying proposals will be reviewed and recommendations made by members of the Spinal Cord and Traumatic Brain Injury Advisory Council. The strengths and weaknesses of each proposal will be reviewed in accordance with the criteria described under **Section V. Proposal Submission**. A formal decision on the recommendations of the advisory council will be made by June 1, 2022.

VIII. GRANT ADMINISTRATION REGULATIONS

Grantee Requirements

All grantees are expected to present at the Minnesota Spinal Cord Injury and Traumatic Brain Injury Symposium during the second or third year of their project period, depending on how the symposium year and the project year align.

Conflict of Interest

Advisory Council members must disclose in a written statement any financial interest in any organization that the council recommends to receive a grant. The written statement must accompany the grant recommendations and must explain the nature of the conflict.

Grant Award Process

Grant contracts will be processed electronically through Statewide Integrated Financial Tools (SWIFT), the state's accounting system, after approval of awards and acceptance of negotiated awards by the project director.

Applicable Regulations

All contracts will contain an audit clause indicating that the relevant records, documents, and accounting procedures and practices of the grantee are subject to examination by the grant contracting agency and either the legislative auditor or the state auditor, as appropriate, for a minimum of six years.

Fiscal Procedures

All Spinal Cord Injury and Traumatic Brain Injury Research Grant Program funds should be assigned to individual accounts which can be readily identified and verified. If an institution receives more than one grant, separate accounts should be established for each grant. Once a grant contract has been fully executed, the grant period will begin.

Narrative and financial reports must be submitted and approved prior to grant closeout. **Requests to change project activities, project personnel, or to move funds between approved budget lines must be submitted in advance with appropriate justification.** Unexpended funds must be returned to the Minnesota Office of Higher Education.

Annual Reports

Each approved project must submit an annual narrative and financial report for each year of their grant period. Financial reports must be submitted from and signed by the office of the institution's chief financial officer. At a minimum, the annual narrative report must document progress made on the objectives of the research project.

Copies of materials which resulted from the grant should be submitted along with the annual narrative report, or as materials are subsequently published.

Attribution

Program material must bear the following acknowledgement:

“Funds for this research project were provided by the State of Minnesota Spinal Cord Injury and Traumatic Brain Injury Research Grant Program administered by the Minnesota Office of Higher Education.”

Publications from Funded Research Projects

Copies of all publications from funded research projects must be provided to the Minnesota Office of Higher Education.

Ownership of Copyrights and Patents

Ownership of any copyrights, patents, or other proprietary interests that may result from grant activities, shall be governed by applicable federal and state regulations and local institutional/organizational policies.

Extensions

Grant extensions/no-cost extensions **MUST** be requested at least 45 days prior to the grant contract expiration date.

IX. AFFIRMATIVE ACTION CERTIFICATION

Responders are required to complete and submit the “Affirmative Action Certification Form” (found in *Appendix J*) for all contracts estimated to be in excess of \$100,000. As required by Minnesota Rules, part 5000.3600, “It is hereby agreed between the parties that [Minn. Stat. § 363A.36](#) and Minnesota Rules, parts [5000.3400-5000.3600](#) are incorporated into any contract between these parties based upon

this specification or any modification of it. Any applications for grants that exceed \$100,000 that do not include the Affirmative Action Certification Form with the application will fail this component.

X. GRANT CLOSE-OUT, SUSPENSIONS, AND TERMINATION

Close-out: Each grant shall be closed out as promptly as feasible after expiration or termination. In closing out the grant, the following shall be observed:

- Upon request, the Office of Higher Education (OHE) shall promptly pay the grant recipient for any allowable reimbursable costs not covered by previous payments.
- The grant recipient shall immediately refund the OHE any unobligated balance of cash advanced to the grant recipient.
- The grant recipient shall submit all financial, performance, evaluation, and other reports required by the terms of the grant.
- The close-out of a grant does not affect the retention period for State and/or Federal rights of access to grant records.

Suspension: When a grant recipient has materially failed to comply with the terms of a grant, OHE may, upon reasonable notice to the grant recipient, suspend the grant in whole or in part. The notice of suspension will state the reason(s) for the suspension, any corrective action required of the grant recipient, and the effective date.

Termination: OHE may terminate any grant in whole, or in part, at any time before the date of expiration whenever OHE determines that the grant recipient has materially failed to comply with the terms of the grant. OHE shall promptly notify the grant recipient in writing of the termination and the reason(s) for the termination, together with the effective date.

The grant recipient may terminate the grant in whole or in part upon written notification to OHE, setting forth the reasons for such termination, the effective date and, in the case of partial termination, the portion to be terminated.

XI. TIMELINE FOR PROPOSALS, AWARDS, AND FUNDED PROJECTS

February 11, 2022	Request for Proposals available to applicants.
March 4, 2022	Deadline for receipt of intent to submit forms.
<u>4:30 p.m., April 15, 2022</u>	<u>Deadline for receipt of proposals.</u>
<u>May 11, 2022</u>	<u>Proposal presentations and Q&A</u>
June 1, 2023	Notification of recommendation for grant award.

Project funding begins with date of grant contract encumbrance.

Submit the complete final proposal as a .pdf document to Alaina.DeSalvo@state.mn.us.

All proposals must arrive by 4:30 p.m., April 15, 2022.

Any final proposal materials submitted late will not be accepted.

All proposals will be acknowledged upon receipt. **Each late or ineligible applicant will be notified that the application will not be considered.**

XII. APPENDIX A
COPY OF STATUTE

LAWS OF MINNESOTA 2021

136A.901 SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY RESEARCH GRANT PROGRAM.

Subd. 1. Grant program.

The commissioner shall establish a grant program to award grants to institutions in Minnesota for research into spinal cord injuries and traumatic brain injuries. Grants shall be awarded to conduct research into new and innovative treatments and rehabilitative efforts for the functional improvement of people with spinal cord and traumatic brain injuries. Research topics may include, but are not limited to, pharmaceutical, medical device, brain stimulus, and rehabilitative approaches and techniques. The commissioner, in consultation with the advisory council established under section [136A.902](#), shall award 50 percent of the grant funds for research involving spinal cord injuries and 50 percent to research involving traumatic brain injuries. In addition to the amounts appropriated by law, the commissioner may accept additional funds from private and public sources. Amounts received from these sources are appropriated to the commissioner for the purposes of issuing grants under this section.

Subd. 2. Report.

By January 15, 2016, and each January 15 thereafter, the commissioner shall submit a report to the chairs and ranking minority members of the senate and house of representatives committees having jurisdiction over the Office of Higher Education, specifying the institutions receiving grants under this section and the purposes for which the grant funds were used.

136A.902 SPINAL CORD AND TRAUMATIC BRAIN INJURY ADVISORY COUNCIL

Subd. 1 Membership.

The commissioner shall appoint a 14-member advisory council consisting of:

- (1) one member representing the University of Minnesota Medical School;
- (2) one member representing the Mayo Medical School;
- (3) one member representing the Courage Kenny Rehabilitation Center;
- (4) one member representing Hennepin County Medical Center;
- (5) one member who is a neurosurgeon;
- (6) one member who has a spinal cord injury;
- (7) one member who is a family member of a person with a spinal cord injury;
- (8) one member who has a traumatic brain injury;
- (9) one member who is a veteran who has a spinal cord injury
- (10) one member who is a veteran who has a traumatic brain injury;
- (11) one member who is a family member of a person with a traumatic brain injury;
- (12) one member who is a physician specializing in the treatment of spinal cord injury
- (13) one member who is a physician specializing in the treatment of traumatic brain injury; and
- (14) one member representing Gillette Children's Specialty Healthcare.

Subd. 2. Organization.

The advisory council shall be organized and administered under section [15.059](#), except that subdivision 2 shall not apply. Except as provided in subdivision 4, the commissioner shall appoint council members to two-year terms and appoint one member as chair. The advisory council does not expire.

Subd. 3. First appointments and first meeting.

The commissioner shall appoint the first members of the council by September 1, 2015. The chair shall convene the first meeting by November 1, 2015.

Subd. 4. Terms of initial council members.

The commissioner shall designate six of the initial council members to serve one-year terms and six to serve two-year terms.

Subd. 5. Conflict of interest.

Council members must disclose in a written statement any financial interest in any organization that the council recommends to receive a grant. The written statement must accompany the grant recommendations and must explain the nature of the conflict. The council is not subject to policies developed by the commissioner of administration under section [16B.98](#).

Subd. 6. Duties.

The advisory council shall:

- (1) develop criteria for evaluating and awarding the research grants under section [136A.901](#);
- (2) review research proposals and make recommendations by January 15 of each year to the commissioner for purposes of awarding grants under section [136A.901](#); and
- (3) perform other duties as authorized by the commissioner.

XIII. APPENDIX B
PROPOSAL COVER SHEET

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM 2022**

PRINCIPAL INVESTIGATOR: _____

RANK, DEPARTMENT, and SCHOOL, if appropriate: _____

INSTITUTIONAL AFFILIATION: _____

E-MAIL ADDRESS OF PI: _____ PHONE NUMBER OF PI: _____

ADDRESS OF PRINCIPAL INVESTIGATOR: _____

TITLE OF PROPOSAL: _____

FUNDING TIER: [] Pilot Project Grant [] Standard Research Grant [] Clinical/Translational Research Grant

RESEARCH AREA: [] Spinal Cord Injury [] Traumatic Brain Injury

PROJECT PERIOD: begins June 1, 2022, or date of contract execution

AMOUNT REQUESTED:

DIRECT \$ _____
INDIRECT \$ _____ (Maximum 8%)
TOTAL \$ _____ (May not exceed the maximum allowable request per each funding tier)

	YES	NO	PROTOCOL #	APPROVAL DATE
RECOMBINANT DNA?	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
HUMAN SUBJECTS?	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
VERTEBRATE ANIMALS?	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
DOES THIS PROJECT INVOLVE CLINICAL RESEARCH?	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

AUTHORIZED REPRESENTATIVE INFORMATION:

To the best of my knowledge and belief, all data in this proposal are true and correct. The document has been duly authorized by the governing body of the applicant.

Institution's Authorized Representative for Approving Proposal Submission (*Please type or print name clearly*):

Title: _____

Phone: () _____ E-mail Address _____

Signature of Institution's Authorized Representative for Approving Proposal Submission:

_____ Date _____

XIV. APPENDIX C

PRINCIPAL INVESTIGATOR/INSTITUTIONAL ASSURANCE FORM

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM**

Principal Investigator/Institutional Assurance:

“The undersigned agrees to accept responsibility for the scientific and technical conduct of the research project and for provision of required progress reports if a grant is awarded as the result of this proposal.”

Date

Principal Investigator Signature

Date

Institutional Official Signature

XV. APPENDIX D
PROGRAM ABSTRACT

PROGRAM ABSTRACT

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM**

PROJECT TITLE:

APPLICANT INSTITUTION:

BACKGROUND TO THE RESEARCH TOPIC:

THE QUESTION(S) OR CENTRAL HYPOTHESIS OF THE RESEARCH:

THE GENERAL METHODOLOGY TO BE USED:

INNOVATIVE ELEMENTS OF THE PROJECT:

**IMPACT ON TREATMENTS AND REHABILITATIVE EFFORTS FOR FUNCTIONAL
IMPROVEMENT OF PEOPLE WITH SPINAL CORD OR TRAUMATIC BRAIN INJURIES:**

(Please use **lay-persons terms** when filling out this form. Use of this form is required. Abstract is limited to one page.)

XVI. APPENDIX E
BUDGET AND BUDGET JUSTIFICATION

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
FISCAL YEAR 2021 RESEARCH GRANT PROGRAM**

Principal Investigator (Last, First, Middle): _____

DETAILED BUDGET FOR BUDGET PERIOD					From	Through	
PERSONNEL <i>(Applicant organization only)</i>		TYPE APPT. <i>(months)</i>	% EFFORT ON PROJ.	INST. BASE SALARY	DOLLAR AMOUNT REQUESTED <i>(omit cents)</i>		
NAME	ROLE ON PROJECT				SALARY REQUESTED	FRINGE BENEFITS	TOTAL
	Principal Investigator			\$	\$	\$	\$
	Collaborator			\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
SUBTOTALS					\$	\$	\$
CONSULTANT COSTS							\$
SUPPLIES							\$
PATIENT CARE COSTS							\$
TRAVEL (IN STATE)							\$
TRAVEL (OUT OF STATE)							\$
OTHER EXPENSES (outline in Budget Justification)							\$
TOTAL DIRECT COSTS FOR BUDGET PERIOD							\$
INDIRECT COSTS (8% of Direct Costs)							\$
TOTAL COSTS							\$
TOTAL REQUESTED RESEARCH GRANT PROGRAM FUNDS							\$

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM**

BUDGET JUSTIFICATION:

XVII. APPENDIX F
SENIOR/KEY PERSONNEL REPORT

MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY RESEARCH GRANT PROGRAM

Principal Investigator (Last, First, Middle): _____

SENIOR/KEY PERSONNEL REPORT

Project Title: _____

All Senior/Key Personnel for the budget period must be listed below.

Name	Degree(s)	Role on Project (e.g. PI, Res. Assoc.)	Institutional Affiliation	Effort Devoted to Project		
				Cal	Acad	Sum

XVIII. APPENDIX G
**BIOGRAPHICAL SKETCH OF PRINCIPAL AND SENIOR/
KEY PERSONNEL**

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM**

Principal Investigator (Last, First, Middle): _____

BIOGRAPHICAL SKETCH

Provide the following information for the **Principal Investigator and any key personnel. DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITLE
------	----------------

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training and residency training, if applicable.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY

- A. Personal Statement**
- B. Positions and Honors**
- C. Selected Peer-reviewed Publications**

XIX. APPENDIX H

**OTHER GRANT SUPPORT FOR PRINCIPAL INVESTIGATOR AND
SENIOR/KEY PERSONNEL**

**MINNESOTA SPINAL CORD INJURY AND TRAUMATIC BRAIN INJURY
RESEARCH GRANT PROGRAM**

Principal Investigator (Last, First, Middle): _____

OTHER GRANT SUPPORT: Provide active support for the **Principal Investigator and any key personnel.** Other Support includes all financial resources, whether Federal, non-Federal, commercial or institutional, available in direct support of an individual's research endeavors, including but not limited to research grants, cooperative agreements, contracts, and/or institutional awards. Training awards, prizes, or gifts do not need to be included.

It is critical that the Other Support page be clear and detailed, and include funding through program projects, centers, joint grants, and other programs as well as the role of the person in each grant and any potential overlap. Both Active and Pending support should be listed.

Include all information noted below for each proposal/award:

NAME OF INDIVIDUAL

ACTIVE/PENDING

Project Number	Dates of Project	Person Months (Cal/Academic/ Summer)
Source	Annual Direct Cost	
Title		

Major Goals of Project

Overlap

XX. APPENDIX I
INTENT TO SUBMIT FORM

**Intent to Submit Proposal for
Minnesota Spinal Cord Injury and Traumatic Brain Injury
Research Grant Program**

If your institution intends to apply for funding under the Spinal Cord Injury and Traumatic Brain Injury Research Grant Program, please provide the Office of Higher Education with the following information:

Principal Investigator's Name _____

Institution/Organization _____

Project Title _____

Address _____

Telephone (____) _____ E-mail _____

Mark the appropriate content area as applies to your proposal. While projects can address one or both content areas, only one must be selected.:

- Research project for functional improvement of people with spinal cord injury
- Research project for functional improvement of people with traumatic brain injury

Check the blank as it applies to your proposal's funding tier:

- Tier 1: Pilot Project Grant
- Tier 2: Standard Research Grant
- Tier 3: Clinical/Translational Research Grant

Please return this form by March 4, 2022, to:

Lain DeSalvo, alaina.desalvo@state.mn.us

The Office of Higher Education (OHE) requests this information solely to help prepare for the proposal review process. Submission of an Intent to Submit form is not required for proposal submission. If you inform the OHE of your intent to apply, but subsequently decide not to do so, please notify OHE accordingly.

XXI. APPENDIX J

STATE OF MINNESOTA
AFFIRMATIVE ACTION CERTIFICATION FORM

State Of Minnesota – Affirmative Action Certification

If your response to this solicitation is or could be in excess of \$100,000, complete the information requested below to determine whether you are subject to the Minnesota Human Rights Act (Minnesota Statutes 363A.36) certification requirement, and to provide documentation of compliance if necessary. **It is your sole responsibility to provide this information and—if required—to apply for Human Rights certification prior to the due date of the bid or proposal and to obtain Human Rights certification prior to the execution of the contract. The State of Minnesota is under no obligation to delay proceeding with a contract until a company receives Human Rights certification.**

BOX A – For companies which have employed more than 40 full-time employees within Minnesota on any single working day during the previous 12 months. All other companies proceed to **BOX B**.

Your response will be rejected unless your business:

has a current Certificate of Compliance issued by the Minnesota Department of Human Rights (MDHR)
–or–

has submitted an affirmative action plan to the MDHR, which the Department received prior to the date the responses are due.

Check one of the following statements if you have employed more than 40 full-time employees in Minnesota on any single working day during the previous 12 months:

- We have a current Certificate of Compliance issued by the MDHR. **Proceed to BOX C. Include a copy of your certificate with your response.**
- We do not have a current Certificate of Compliance. However, we submitted an Affirmative Action Plan to the MDHR for approval, which the Department received on _____ (date). **Proceed to BOX C.**
- We do not have a Certificate of Compliance, nor has the MDHR received an Affirmative Action Plan from our company. **We acknowledge that our response will be rejected. Proceed to BOX C. Contact the Minnesota Department of Human Rights for assistance.** (See below for contact information.)

Please note: Certificates of Compliance must be issued by the Minnesota Department of Human Rights. Affirmative Action Plans approved by the Federal government, a county, or a municipality must still be received, reviewed, and approved by the Minnesota Department of Human Rights before a certificate can be issued.

BOX B – For those companies not described in BOX A

Check below.

- We have not employed more than 40 full-time employees on any single working day in Minnesota within the previous 12 months. **Proceed to BOX C.**

BOX C – For all companies

By signing this statement, you certify that the information provided is accurate and that you are authorized to sign on behalf of the responder. You also certify that you are in compliance with federal affirmative action requirements that may apply to your company. (These requirements are generally triggered only by participating as a prime or subcontractor on federal projects or contracts. Contractors are alerted to these requirements by the federal government.)

Name of Company: _____ Date _____

Authorized Signature: _____ Telephone number: _____

Printed Name: _____ Title: _____

For assistance with this form, contact:

Minnesota Department of Human Rights, Compliance

Mail: The Freeman Building 625 Robert Street North, Saint Paul, MN 55155 TC Metro: (651) 296-5663 Toll Free: 800-657-3704

Web: www.humanrights.state.mn.us Fax: (651) 296-9042 TTY: (651) 296-1283

Email: compliance.mdhr@state.mn.us