

American Diabetes Association

Research Programs

July 2023

Innovative Research to Improve the Lives of Women with Diabetes Across the Lifespan

Junior Faculty Development Award

Letter of Interest (LOI) Instructions

<https://professional.diabetes.org/research-grants>
grantquestions@diabetes.org

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Our Mission is to prevent and
cure diabetes and to improve the
lives of all people affected by
diabetes.

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I. Women's Health and Diabetes Junior Faculty Development Award

The American Diabetes Association is requesting letters of Interest (LOIs) for research focused on innovative research to improve the lives of women with diabetes across the lifespan.

Background: Diabetes is one of the leading causes of cardiovascular disease (CVD), blindness, kidney failure and lower-limb amputation in women. Gender-specific differences affect screening, diagnostic and treatment strategies as well as the development of complications and mortality rates. Impaired glucose and lipid metabolism, body fat distribution and energy balance, and associated CVD are greatly influenced by steroidal and sex hormones. Compared with men, women have 25-50% greater excess risk for CVD with lower survival rates and poorer quality of life after heart attack. Women with diabetes have a 19% greater risk for the development of vascular dementia than men. Women with diabetes also have a higher risk for end stage kidney disease than men with the same condition suggesting that the female gender could accelerate disease progression. Furthermore, the pharmacokinetics and side-effects of drug therapies are different between the sexes.

The burden of diabetes is unique and can affect both mothers and their unborn children. In the United States, about 1-2% of pregnant women have pre-existing diabetes and about 6-9% develop gestational diabetes (GDM). Asian and Hispanic women have higher rates of GDM and black and Hispanic women have higher rates of pre-existing diabetes during pregnancy. Having diabetes during pregnancy increases the risk of babies being born large for gestational age (LGA) or developing obesity and type 2 diabetes (T2D) in the future. Higher HbA1c levels are associated with significantly increased risk of congenital malformations and stillbirth. Women with GDM have 5- to 7-fold increased risk of developing T2D within 5-10 years however only 30-70% of women receive screening after delivery.

As such, a better understanding of the sex and gender differences may improve care delivery and lead to better outcomes (more personalized care) for women with diabetes across the lifespan.

Goal: The mission of the American Diabetes Association is to prevent and cure diabetes and improve the lives of all people affected by diabetes. This request for applications (RFA) is soliciting proposals for research to better understand clinically important sex and gender differences to optimally inform prevention, diagnosis and treatment strategies for women across the lifespan and the development of sex-specific clinical guidelines where warranted.

Scope: While this call is broad in scope and encompasses basic through clinical research, significant emphasis will be placed on diabetes clinical research and translation. Examples of eligible applications may include, but are not necessarily limited to projects involving:

- Research to delineate clinically relevant sex-specific drivers of disparity in the risk for cardiovascular, kidney, cognitive complications (eg mechanistic studies using confirmed relevant models of human disease, translational studies leveraging predictive biomarkers, clinical data sets, patterns in access and adherence to guidelines directed therapies etc.)
- Research to improve screening and pregnancy outcomes in women with diabetes and reduce the risk of subsequent T2D In those with GDM
- Research to define genetic and psychosocial factors contributing to the unique aspects of diabetes in women across the lifespan.
- Research to improve understanding of disparities in process of care (for example CV and obesity management).

Importantly, submissions should indicate how the proposed research will have a significant impact on outcomes. For the purposes of this RFA, research proposals focusing on non-diabetic obesity and pre-diabetes are considered out of scope.

A. Deadline

The submission deadline for this LOI is **November 14, 2022** for anticipated July 1, 2023 funding. Electronic letters of interest (LOIs) must be submitted online via the official Grant Management Site by 5:00 PM Eastern Time on the deadline date.

B. Institutional Approval

The applicant, also referred to as the Principal Investigator (PI), must have the institution's approval prior to applying electronically. Although written confirmation is not required, PI must ensure that the Sponsoring Institution is aware of the grant and has acknowledged its intent to fully support the award. In addition, PI must attest that the grant has been routed through, and approved by, the usual administrative channels of the Sponsoring Institution.

C. Notification

Upon application submission, the applicant will be sent a confirmation of receipt for their Letter of Interest submission via email. **Applicants will receive updates on the status of their LOI no later than January 31, 2023.** This notification will be sent to the applicant's email address as entered into the online application form. If the PI does not receive a confirmation email within the indicated time frame, please contact grantquestions@diabetes.org.

D. Grant Support

The ADA Junior Faculty Development Award provides up to \$138,000 per year (direct and indirect costs) for up to three years. **The total award amount (direct plus indirect costs) cannot exceed \$414,000 for a three-year award. Indirect costs cannot exceed 10% of requested direct costs.**

The allowable award duration is contingent on previous career development funding. If an applicant has not had previous independent career development support, 3 years of funding may be requested. If the applicant has previously completed an award of similar intent (NIH K awards, foundation/non-profit career development awards, etc.), a maximum of 2 years of funding may be requested.

The PI is eligible for up to an additional \$10,000 per year towards repayment of the principal on loans for a doctoral degree (MD, PhD, DPM, PharmD or DO). These funds are **in addition** to the \$138,000 total cost per year for salary and research support (*and should not be used to calculate indirect costs*). Annual loan repayment is contingent upon approval of an Annual Progress Report at the end of each funding year and will be disbursed directly to the PI's lending institution.

Award funds must be used for research activities in the described project and are to be divided between salary and project support. Support for the PI's yearly salary (excluding fringe benefits) cannot exceed \$75,000 and should be proportional with the percent effort dedicated to this project. Research support may be used to defray

the costs of a postdoctoral fellow, technician, supplies, equipment, travel, etc. Refer to the [Budget Guidelines](#) for specifics regarding allowable expenses.

E. Review Criteria

Applications will be evaluated on the potential of the research, if successful, to have a major impact on the development, dissemination or implementation of effective interventions or strategies that improve outcomes for women with diabetes across the lifespan. Alignment with the goals of the RFA, degree of innovation and scientific rigor are key considerations. Relevant experience of the Principal Investigator, availability of the appropriate facilities and resources, the ability of the investigator/site to recruit target populations, and/or show access to, and availability of, data sources, samples and study medications (if applicable) are also pertinent. For fellowships, relevant experience and training history of the Mentor will be strong considerations. The specific timeline for progress of enrollment, data analyses and/or other major project milestones and an appropriate budget allowing for the completion of the proposed work need to be stated.

Only Postdoctoral Fellowship (PDF) applications that are moved to full review will receive reviewer critiques, which will be sent within 1 month of final notification. This applies to both funded and unfunded submissions.

For all other award mechanisms (Junior Faculty Development, Innovative Basic Science, Innovative Clinical/Translational Science): Only LOIs invited to submit a full application will receive reviewer critiques, which will be sent within 1 month of final notification. This applies to both funded and unfunded submissions.

Eligibility Stipulations

Applicant must hold a PhD, MD, PharmD, DO or DPM degree or, for other health professionals, the equivalent doctoral-level health- or science-related degree, and possess the necessary skills and training to carry out the proposed work.

Awards are limited to institutions within the United States and U.S. possessions. All investigators must be legally authorized to work in the U.S. Institutional confirmation of permission to work within the U.S. will be required for all applicants at the time of submission.

One person must be specified as the Principal Investigator; multiple PIs/co-PIs are not permitted. Individuals may not currently hold another active ADA Award.

Faculty Appointment

Applicants must hold a full-time independent faculty position up to and including Assistant Professor at a university, university-affiliated research institution or other non-profit research institution. The applicant should have no more than 10 years of research experience following receipt of their terminal degree. For the purposes of determining eligibility, time away from research (e.g. all clinical training, parental leave, medical/family leave) does not count toward the 10-year maximum. Any time spent engaged in part-time research activities may be pro-rated (e.g. four years of 50% research effort counts as two years of research training). If research training time is not consecutive, an explanation must be included prior to the biosketch outlining the reason for the gap in research experience.

If an appointment is less than full-time, it must be noted on the budget page and fully explained on the budget justification page. Submissions from PIs with less than a full-time appointment will be considered on a case-by-case basis.

Applicants from non-university research institutions must provide a letter from the proper institutional official to explain how the position of the applicant compares to a faculty position in a traditional academic institution. Any ambiguity about the applicant's position can negatively impact the submission.

Other Sources of Support

Applicants cannot currently hold or have previously received independent NIH project support as PI (e.g., NIH R00, R01, U01 or the equivalent). If an R01, U01 or the equivalent is obtained during the term of the Junior Faculty Development Award, the applicant may hold both awards concurrently, provided there is no scientific or budgetary overlap.

Applicants may not hold a Junior Faculty Development Award concurrently with other awards of similar intent (i.e., NIH K award series, including K99; other foundation/non-profit development awards); however, applicant may have completed previous career development funding. Please note that previous career development support impacts the number of years that may be requested for funding support, refer to [Grant Support](#) for details.

Junior Faculty Development Award applicants must agree to devote **at least 75% of total time and effort towards research** during the period of Association funding. This percentage includes time spent on the Association-funded grant *in addition to* grants funded by other agencies.

Investigator Funding Cap

Due to fiscal constraints in research funding, the Association limits applicant eligibility to maximally support early career investigators and investigators at a higher level of need to maintain their existing research programs.

Investigators with support as PI exceeding **\$500,000 in direct costs per submission year** are not eligible to apply. Non-profit/foundation, government and investigator-initiated pharmaceutical/industry awards count toward the \$500,000 funding cap, but multi-center and industry-sponsored clinical trial grants are excluded from calculation.

Applicants must provide accurate and complete information regarding all other sources of research support (current and pending), including titles of grants, major goals/specific aims, funding amounts and periods, and role of the PI. ***Ambiguity regarding other funding will result in administrative disapproval of the letter of interest.***

Applicants cannot hold or apply for more than one Association Award at a time. Investigators currently funded through the Association's Research Programs cannot apply for additional support, unless the existing award expires by the funding start date of the new award.

Open Data and Resource Sharing

All data resulting from ADA-funded research that can be shared without compromising human subject protections must be shared to an approved open data repository within 6 months of publication or within 18 months of the conclusion of the funding period, if the study remains unpublished.

A listing of repositories recommended by NIH is available on our website under [Funded Research](#). Awardees are encouraged to use the repository most appropriate for the subject matter of the research conducted.

Resources developed with ADA grant funding are required to be made available to the broader scientific community. ADA-funded projects expected to generate unique model organism resources or genomic data must include specific plans during the full application process for sharing and distributing. If sharing is not possible, funded applicants will be required to provide an acceptable explanation and request for waiver.

In general, to the extent possible, ADA grantees are expected to share all scientific resources upon request for the advancement of research progress. While the data and resource sharing plan will not impact the application score, it is a requirement for submission.

Institutional Assurances

The ADA requires IRB and IACUC assurances for human and animal subjects, respectively, if these are used in the funded research experiments/protocols. Funded applicants must provide IRB and/or IACUC approval and submit documentation of approval(s) during the full application process or by the start date of the award (July 1, 2023). Award activation is contingent upon submission of proof of approval. If approval(s) are not received by the award start date, the award letter will not be provided.

Confirmation of Study Drug

If the proposed research requires drug or drug placebo, the investigator must demonstrate having access to the needed research supplies by submitting documentation during the full application process or by the start date of the award (July 1, 2023). Award activation is contingent upon submission of proof of approval. If approval(s) are not received by the award start date, the award letter will not be provided.

F. Budget Guidelines

Salary for Principal Investigator

PI salary support cannot exceed \$75,000 per year and cannot include fringe benefits. Salary allocations should be in accordance with the PI's percent effort on the grant, based on a full-time, 12-month appointment at the PI's institution.

Technical Personnel

Technical personnel can receive salary and fringe benefits from an Association grant in accordance with the percent effort on the grant and within allowable institutional salary guidelines. Technical personnel include any individuals working on the research project in a scientific or technical capacity. For example, collaborating investigators, postdoctoral fellows, lab technicians, nurses, statisticians, and patient recruiters are all considered technical personnel. Administrative, secretarial and/or custodial employees are **not** considered technical personnel and are ineligible to receive salary from an Association grant. If technical personnel have not yet been hired or identified, simply note that the person is "TBD" (to be determined). Applicants must provide the Association with the biographical sketch of all individuals with a graduate level degree or above who are receiving a salary and fringe benefits from an Association grant as soon as they have been identified.

Subcontracts

During the full application process, individual subcontracts must be indicated on the main budget page and itemized subcontract budgets must be provided on a separate budget page. **Any indirect costs associated with a subcontract must be incorporated into the overall budget's yearly maximum indirect costs allowed (i.e., 10% of total direct costs) in the main budget.** The combined indirect costs for the grant and any subcontracts cannot exceed the 10% maximum indirect rate allowed for the award.

Supplies

There is no limit on the amount of budget funds that can be used for laboratory/research supplies. A categorized supply list must be included on the budget form and required financial reports submitted during the full application process. Office supplies are not permitted to be categorized as a direct cost.

Equipment

The Association defines equipment as any item costing more than \$5,000 with a lifespan of two or more years. PIs may not spend more than 20% of direct costs per year on equipment purchases. All equipment purchases must be itemized during the full application process. Equipment not approved in the original proposal requires ADA written approval before being purchased. **Equipment purchases are not permitted in the final year of the award.**

Other Expenses

Other expenses must be itemized. Some examples of additional expenses eligible to be included in this category include:

- Travel to diabetes-related scientific meetings (limit of \$5,000 per year)
- Publication costs (page charges, reprint costs)
- Books (\$500 limit)
- Animal housing and acquisition costs

Prohibited Expenses

The following items **cannot** be purchased with award funds:

- Rent for office or lab space
- Computer hardware or other smart devices (e.g., desktop, laptop, printer, iPad, smart phone)
- Telephone or internet service
- Non-technical (e.g., custodial or administrative) support
- Tuition
- Relocation costs
- Memberships and subscriptions (including ADA Professional Section membership)
- IRB or IACUC administration fees
- Grantsmanship consultant fees
- Visa or legal fees
- Office supplies
- Liability insurance

This is not a complete list. Any questions about whether a particular item or service may be purchased with direct costs should be referred to the ADA's Research Programs Office. **The ADA reserves the right to refuse to pay for items or services with direct costs.** Unsanctioned purchases will be deducted from the recipient's grant.

Indirect Costs

Indirect costs are limited to 10% of direct costs, and the yearly total amount (direct plus indirect costs) cannot exceed \$138,000 per year (*not including optional doctoral loan repayment*). For example, projects requesting \$138,000 per year are maximally allowed indirect costs of \$12,545 (at 10% of directs), with direct costs totaling \$125,455.

Doctoral Loan Repayment

Applicants can request an additional \$10,000/year on their budget page for repayment of the principal on loans towards a doctoral (PhD, MD, PharmD, DO or DPM) degree. No additional form is required to request these funds.

Annual loan repayment is contingent upon approval of the annual Progress Report. Loan repayments will be disbursed directly to the PI's lending institution.

Overlapping Funding

If additional, overlapping support for the Association funded project is obtained from any other source at any time, funds awarded by the Association will be terminated, and any remaining uncommitted funds must be returned.

II. Online Instructions

Letters of Interest and subsequent Invitation to Apply must be submitted online via the official Grant Management Site, available through the ADA's website at <https://professional.diabetes.org/research-grants>. Submissions outside the site will not be accepted.

Applicants must complete the online forms and upload the complete the applicable supporting documentation appropriate to the Letter of Interest (Research Plan) as a PDF attachment. Multiple attachments or other formats will not be accepted. All award guidelines and stipulations for preparing the Letter of Interest must be followed (e.g., supporting documents, page limits, font sizes).

Follow the steps below to create a new submission in the Grant Management Site. If you have any difficulties accessing the site, contact grantquestions@diabetes.org for assistance.

1. Click **Create a New Letter of Interest** at the bottom of the section
2. Create a new user account, or log in using an existing account
3. Complete the Eligibility Quiz to confirm your eligibility status – be sure to respond candidly for accurate results, submissions that do not meet eligibility criteria will be administratively disapproved
4. After successful completion of the quiz, the letter of interest process will begin
5. You may leave the site at any point by clicking **Save & Finish Later** at the bottom of the screen
6. After saving your work, you can log out and complete your letter of interest at a later time
7. To resume an in-progress letter of interest, access <https://professional.diabetes.org/research-grants> and select **Grant Management Site** on the navigation menu

Required details for each section of the online form are outlined below.

A. Principal Investigator

Contact Information

The applicant must provide the institution's full legal name where the research will be conducted. **Incorrect or incomplete information may cause a delay in letter of interest and award notification.** Do not abbreviate the institution's name.

ORCID Identifier

[ORCID](#) (Open Researcher and Contributor ID) provides a unique, persistent identifier for researchers that supports automated linkages to the investigator's digital research output. PIs are required to have an ORCID identifier at the time of letter of interest. [Registration](#) is available free of charge.

American Diabetes Association Membership

Award recipients are required to become members of and/or maintain membership in the Professional Section of the American Diabetes Association for the duration of their award. The membership fee cannot be paid with ADA grant funds. If selected for funding, the PI must submit proof of ADA membership prior to award activation. Membership is not required in order to submit.

Work Permission

All investigators must have permission to legally work in the United States. Institutional confirmation of work permission will be required for all applicants.

B. Project Details**Title of Proposal**

Only the first letter of the title's first word should be capitalized. The title of the letter of interest should not have symbols, such as "β." Instead of the symbol, type the full name. For example, instead of "β," type "beta." The Grant Management Site cannot support symbols, and any non-ASCII characters will be converted to question marks ("?") upon submission.

C. Requested Budget

Enter the requested total amount for the award.

D. Project Summary**Research Type**

Characterize the proposed research as clinical or translational.

Clinical research is defined as research where the effect of health disparities on diabetes and its complications is evaluated, and includes therapeutic interventions, health services/care delivery research and epidemiological research aimed at identifying the distribution and determinants of disease in a population.

Translational research supported through this mechanism will typically involve expertise, collaboration and engagement across disciplines, and falls into two broad categories, (1) translating basic biological discoveries about how chronic discrimination can alter diabetes metabolism into clinical applications that improve human health, and (2) accelerating the translation of advances from research in health disparities on diabetes and its complications to the community setting or enhancing the adoption of best practices in patient care.

Diabetes Type of Proposed Research

Select the diabetes category relevant to the proposed research:

- Both Type 1 and Type 2 Diabetes
- Type 1 Diabetes
- Type 2 Diabetes
- Gestational Diabetes
- Obesity
- Pre-diabetes/insulin resistance
- Monogenic

Therapeutic Goal

Indicate the ultimate therapeutic goal of the research being proposed:

- Cure Diabetes

- Manage Diabetes
- Prevent Diabetes
- N/A

Research Program Area

Select up to three program areas that describe the type of research being proposed.

Scientific Abstract

(250-word maximum)

The scientific abstract must be a technical description of the proposed work that includes a background, hypothesis, supporting rationale, specific aims, research design, and relevance to a cure, prevention, and/or treatment of diabetes. The abstract should be written in the third person.

Abstracts should not include symbols, such as “ α .” The Grant Management Site cannot support special characters, and any non-ASCII symbols will be converted to question marks (“?”) upon submission. Use the full term instead of the symbol, e.g., used the term “alpha” instead of “ α ”.

Lay Abstract

(250-word maximum)

The lay abstract must be a non-technical description of the proposed work, not to exceed 250 words. This description must not repeat the scientific abstract. Instead, use non-technical language so the general public that does not have a scientific background can understand. The non-technical description must include the study’s purpose and significance to diabetes. Do not include confidential information in the lay abstract because if the award is funded, the lay abstract will become public information. The lay abstract must be written in the third person.

Abstracts should not include symbols, such as “ β .” The Grant Management Site cannot support special characters, and any non-ASCII symbols will be converted to question marks (“?”) upon submission. Use the full term instead of the symbol, e.g., use the term “beta” instead of “ β ”.

RFA Alignment

(250-word maximum)

Applicants must detail how the proposed research directly aligns with the goal and scope of the RFA and will have a significant impact (“move the needle”) on outcomes in those individuals living with diabetes.

III. Research Plan

A. File Format

Applicants must combine all requisite components of the LOI into **one PDF document**, ordered and named in accordance with application instructions.

Hard copies, multiple attachments, or other formats will not be accepted and will result in administrative disapproval of letter of interest.

B. Formatting Requirements

Letters of interest must abide by the following format specifications:

- **Font:** Use an Arial, Helvetica, Palatino Linotype, or Georgia typeface, a black font color, and a font size of 11 points or larger. (A Symbol font may be used to insert Greek letters or special characters; the font size requirement still applies.) Type density, including characters and spaces, must at least 15 characters per inch. Since font size can appear larger on a computer screen, applicants are responsible for printing the PDF and measuring the font size. Letters of interest that do not adhere to these formatting requirements will not be reviewed.
- **Font for Figures, Graphs, Diagrams, Charts, Tables, Figure Legends, and Footnotes:** Label fonts may be a smaller point size, but must be in a black font color, readily legible, and follow the font typeface requirement. Color can be used in figures; however, all text must be in a black font color, clear and legible.
- **Margins:** Margins must be at least one-half inch.
- **Spacing:** Single-spacing is acceptable.
- **Legibility:** The PDF document should be easy to read. Reviewers read many submissions and respond favorably to clear, organized, well-written proposals.

C. Research Plan Contents

Specifications for content are described below.

The ADA will not accept materials that are not listed in the Table of Contents Template. For example, additional data, manuscripts, etc., will not be permitted and will be administratively removed from the letter of interest.

1) **Research Plan (2-page maximum)**

Plan of the proposed research following the outline below. Figures and tables must be included within the two-page maximum limit. ***LOIs that do not conform to these guidelines or exceed the maximum page limits within each section will be administratively disapproved.***

The overall proposal should be kept as brief as possible while still presenting the complete research plan. As a panel of experts in the field will review proposals, established methods may be referred to by reference rather than described in detail in the proposal. New methodology or novel approaches should be described in detail. In general, the scope of the proposal should match the program budget. The following format must be used for the Research Plan:

a) Specific Aims

Provide an overview of the proposed research, including a high-level summary of the problem, relevance to the disease state and theoretical framework. Concisely state the goals of the work and summarize the expected outcome(s).

b) Significance

Explain the importance of the problem or barrier to progress in the field of diabetes research addressed by the project, and the necessity of the proposed work to the development of new knowledge in this research area. Describe how the expected results will make a clear and significant contribution to the field of scientific knowledge, technical capabilities and/or clinical practice for people with diabetes.

c) Research Approach

Describe the overall strategy, methodology and analyses used to accomplish the specific aims of the project, integrating any preliminary data into discussion of the specific aim(s). Discuss any potential pitfalls and outline contingency plans. Particularly if the project is in the early stages of development, address the management of any high-risk aspects of the proposed work and describe strategies to establish feasibility. Expected outcomes should also be provided. Figures and tables must be included within the page limit.

Submissions that are incomplete or do not adhere to section page limits will be administratively disapproved.

IV. Letter of Interest (LOI) Submission

To complete the online submission process at a later date, select **Save and Finish Later** at any point during the process. Saved Letters of Interest can be accessed through the Grant Management Site, available at <https://professional.diabetes.org/research-grants>.

Applicants must select **Review & Submit** when ready to submit. **Changes cannot be made to submissions**. The PI must have approval from the sponsoring institution prior to submission and must agree to accept responsibility for the scientific and technical conduct of the research project and accepts all terms and conditions of the award.

Submission Issues? Troubleshooting Tips

1. The Grant Management Site utilizes cookies on your computer. To access the online letter of interest, you may need to:
 - a. Close all open browser windows
 - b. Clear your cache and cookies
 - c. Open a new browser window
 - d. Paste the link below into the address bar:
www.grantrequest.com/SID_320
 - e. Change your security setting to allow cookies
2. Submissions will not be saved unless applicant creates an account before beginning the process. Submissions created without user accounts will have to start over with the online process.
3. Changes cannot be made to submissions. Be sure to proofread your letter of interest carefully prior to submission.

Electronic submissions must be submitted by **5:00 PM Eastern Time** on the deadline date. Any questions regarding the grant submission process should be sent to grantquestions@diabetes.org.

V. Questions? Contact Us

- Website URL: <https://professional.diabetes.org/research-grants>
- For any questions, please contact grantquestions@diabetes.org.