



2021 Award Application: Sun Pharma Research Award

1. TITLE OF PROJECT (Do not exceed 100 characters)

2a. NAME (Last, First, Middle Initial)

2b. DEGREE(S)

2c. DATE OF BIRTH

2d. GENDER
 Female Male

2e. CURRENT POSITION TITLE

2f. CURRENT MAILING ADDRESS

2g. POSITION DURING YEAR OF PROPOSED SUPPORT

2h. TELEPHONE AND FAX (Area Code, Number and Extension)

Tel Fax

2i. E-MAIL ADDRESS

2j. U.S. CITIZEN

YES NO If no, visa status:

2k. ETHNICITY*

Hispanic Non-Hispanic

2l. RACE* (Select all that apply.)

- American Indian or Alaskan
- Asian
- Black or African American
- White
- Native Hawaiian or Pacific Islander
- Do not wish to provide

2m. HUMAN SUBJECTS RESEARCH REQUIRING IRB REVIEW/APPROVAL

YES NO

2n. OTHER INSTITUTIONAL ASSURANCES

(Select all that apply.)

- Animal
- Biologics
- Hazardous materials

2o. OTHER FUNDING

- I am \ I am NOT . . . currently **seeking funds** from other sources for this or other projects.
- I am \ I am NOT . . . currently **receiving support** from other sources for this or other projects.

2p. PERCENT OF TIME TO BE SPENT ON ALL RESEARCH: ___%

3a. NAME OF SPONSORING INSTITUTION

3b. SPONSORING DIVISION OR DEPARTMENT

3c. DERMATOLOGY DEPARTMENT CHAIR OR DIVISION CHIEF

Name Title

Address

Tel E-mail

3d. DERM. DEPT. CHAIR OR DIV. CHIEF SIGNATURE / DATE

3e. INSTITUTIONAL OFFICER (Dean or designated official.)

Name Title

Address

Tel E-mail

3f. INSTITUTIONAL OFFICER SIGNATURE / DATE

3g. FISCAL OFFICER

Name Title

Address

Tel E-mail

IMPORTANT NOTE: Contact the DF office to obtain your personal, secure link to submit your application package via Dropbox: DFRAP@dermatologyfoundation.org.

4. APPLICANT SIGNATURE / DATE "I certify that the statements in this application are true to the best of my knowledge. I affirm that the proposed research aims are unique to this award. I agree that research funds awarded to me will only be used as defined in the proposed budget, for the project/purpose identified in my application. Any unused funds will be returned to the Foundation. I hereby agree to provide a written progress report and financial report as required by the DF. I also agree to be available to present completed research to the DF and/or sponsor of this award."

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*This information is used for aggregate statistical reporting.