

University of California San Diego 9500 Gilman Drive, MC 0716 La Jolla, CA 92093-0716 (858) 534-5545 Fax: (858) 822-5840 Email: cfar@ucsd.edu http://cfar.ucsd.edu

O-K Review Submittal Check-List

It is important for SD CFAR to know the outcome of investigator's participation in the O-K Review process. It is a key indicator used to document value-added as well as to justify resources allocated to the O-K Review. If you have participated in the O-K Review in the past, you must have provided NIH funding outcome information for prior applications to the Administrative Core (cfar@ucsd.edu) or on the cover sheet checkbox below to be eligible to participate.

Checklist for a **full review**:

K Applications:
Candidate Background
Career Goals and Objectives
Aims
Research Plan
List of mentors
Applicant Biosketch
Mentor Biosketch
Proposal has undergone at least one round of review and revision with mentor
Proposal meets NIH formatting requirements and page limits
R Applications:
Aims
Research Strategy
Candidate Biosketch
Proposal has undergone at least one round of revision and revision with co-investigators
Proposal meets NIH formatting requirements and page limits

If you have checked off all of the above applicable elements, your application is eligible for O-K review. If any items are missing or incomplete, you will qualify for a <u>limited review</u> only.

If partial documents are submitted or the applicant is unable to attend the in-person review panel, there will be a <u>limited review</u> only.

SD CFAR O-K Review Cover Sheet

Please provide the following information for the application you would like to submit for the upcoming O-K Review. Please note this form is two pages.

Your name:	
Your email address:	
Title of application:	
Type of application (K, R, Other): If Other, please link to online FOA. If no online link, please attach PDF of FOA with your Specific Aims submission. Please indicate due date for Other application types. Is this a new OK-Review submission or a resubmission? Note: For NIH resubmissions, please include your NIH summary statement, your introduction as well as text marked with changes. If you did not submit to the NIH, but this is a resubmittal to the O-K Review, please mark changes you made to	
the text to address the feedback from the previous OK Review panel.	
Have you previously participated in the OK-Review for this or any other grant application? (yes/no) If so, what was the outcome of your grant application submission? (provide cycle and outcome)	
Which NIH institution? If not applicable, enter "N/A."	
General research area (please choose one): • Basic/laboratory • Clinical/translational • Behavioral	
Statistics review requested? (yes/no)	
Link to online RFA (copy/paste):	
Mentor's name:	
Co-investigators on this application (list all):	
Recommended reviewers for this draft:	

Certifications

Applicant

I certify that I will be present for the in-person review panel. I understand that if I cannot be present, I will only receive a limited, or rapid, review.

I understand that SD CFAR needs to know the outcome of my participation in the O-K Review. It is a key indicator used to document value-added as well as to justify resources allocated to the O-K Review. Therefore, I certify that I will report NIH funding outcome information to the SD CFAR Administrative Core (cfar@ucsd.edu) in a timely manner. I understand that failure to report this outcome may prohibit me from participating in future O-K Reviews.

Applicant's Signature	Date
Applicant's Mentor (For K and F30 Application	ns)
I certify that I have reviewed, or will commit to strategy prior to submission to the O-K Review	o reviewing, the applicant's specific aims and research v.
Mentor's Signature	 Date