



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
National Institutes of Health

National Institute of Diabetes and
Digestive and Kidney Diseases
Bethesda, Maryland 20892

DATE

Our Reference:

Dear Business Official:

The above referenced pending application falls within the NIDDK zone of funding consideration and has been selected for a potential award. Any commitments and expenditures made prior to the receipt of the official Notice of Grant Award is at the grantees own risk.

The information listed below must be provided in order for us to complete our review of this application and should be submitted in a timely manner to avoid delays in a potential award:

- Current status of all other support for the Principal Investigator AND other key personnel (see below). Please address any scientific, budgetary or commitment overlap.
- Copy of current Institutional Animal Care and Use Committee (IACUC) approval for protocols involving use of vertebrate animals, if necessary.
- Copy of Animal Sharing Plan, if necessary.
- Copy of current Human Subjects IRB approval, if necessary
- Copy of Human Subjects Education Certification for ALL personnel involved in human subjects research, if necessary.
- Copy of current Data Safety and Monitoring Plan, if human subjects are involved.
- If applicable, address any administrative notes/concerns identified on the Summary Statement.

A description of NIH policies and information required may be found in the instructions for the PHS 398 Grant Application (<http://grants.nih.gov/grants/funding/phs398/phs398.html>).

All of this information may be submitted using the Just-In-Time feature of the NIH Commons found in the Commons Status section. If using the Commons, ALL information must currently be submitted at one time **BY THE AUTHORIZED SIGNING OFFICIAL AT YOUR INSTITUTION**. For information on the Commons see: <https://commons.era.nih.gov/commons/>

Alternatively the above information can be submitted directly to the Grants Management Specialist listed below. This information should be countersigned by an authorized institutional business official. It should be submitted via email or by facsimile with a cover sheet labeled "JIT Information" and should include the application number and name of the Principal Investigator.

INSERT Grants Mgt Name

Insert email address (preferred method)

Fax: 301-480-3504

Please be aware that this letter does not serve as notification of an award. Feel free to contact me if you have any questions about the status of your application.

Enclosure

Other Support (excerpted from PHS 398, Format Page 7-GG)

Other support is defined as 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. No longer included are training awards, prizes, or gifts.

Information on active and pending other support is required for key personnel, excluding consultants. For individuals with no active or pending support, indicate "None." Neither the application under consideration nor the current PHS award for this project should be listed as other support.

If the support is provided under a consortium/subcontract arrangement or is part of a multiproject award, indicate the project number, principal investigator, and source for the overall project and provide all other information for the subproject only.

If you submitted "Other Support" pages with your application including all of the information indicated below and there has been no change in other support, you may state that there has been no change since the time of submission in a letter countersigned by an authorized institutional business official.

Instructions for Selected Items

Project Number: If applicable, include a code or identifier for the project.

Source: Identify the agency, institute, foundation, or other organization that is providing the support.

Major Goals: Provide a brief statement of the overall objectives of the project, subproject, or subcontract.

Dates of Approved/Proposed Project: Indicate the inclusive dates of the project as approved/proposed. For example, in the case of NIH support, provide the dates of the approved/proposed competitive segment.

Annual Direct Costs: In the case of an active project, provide the current year's direct cost budget. For a pending project, provide the proposed direct cost budget for the initial budget period.

Percent Effort: For an active project, provide the level of effort (even if unsalaried) as approved for the current budget period. For a pending project, indicate the level of effort as proposed for the initial budget period. In cases where an individual's appointment is divided into academic and summer segments, indicate the proportion of each devoted to the project. If projected effort of any key personnel will be greater than 100% should the current application be funded, steps must be proposed to reduce the level of effort to 100%. If these steps involve reduction of effort on existing grants, the funding agency must be informed of this change and must approve it.

Overlap: After listing all support, summarize for each individual any potential overlap with the active or pending projects and this application in terms of the science, budget, or an individual's committed effort. Any necessary resolution of overlap due to this application being funded will occur in conjunction with the applicant institution and awarding agency staff at the time of award.