INSTRUCTIONS & FORMAT

RFP – Swine Disease Matrix Antibody Detection Research,

Preliminary Proposal

June 16, 2017

Thank you for your interest in the Research Program of the Swine Health Information Center! Please read the following instructions completely.

PRELIMINARY PROPOSAL

* The proposal must be typed in the required format on **NO MORE THAN 2 PAGES, FOLLOWING THE COVER PAGE**. ONLY 2 PAGES WILL BE REVIEWED AND USED FOR A FULL PROPOSAL REQUEST DECISION.
* Your proposal must be single spaced, typed in 10-point font size, Times New Roman font, with margins of .5” on left, right, top and bottom.
* **Proposals should be submitted as a WORD file – not PDF.**
* **PLEASE REMEMBER TO TURN OFF TRACKING CHANGES BEFORE SUBMITTING THE PROPOSAL!**

Save your proposal with the file name of: **“LAST NAME, FIRST INITIAL – Title of Proposal”*.*** Example: **SMITH,J – Proposal.doc**. If you are submitting more than one proposal, please use **SMITH,R-2 – Proposal.doc.**

Proposals should be emailed to [research@swinehealth.org](mailto:research@swinehealth.org) and received before 12:00 AM, June 16, 2017.

***PLEASE DELETE THIS PAGE OF INSTRUCTIONS BEFORE YOU SUBMIT YOUR PROPOSAL.***

***THANK YOU***

**Swine Health Information Center**

**Swine Disease Matrix Research - 2017**

**Preliminary Proposal Cover Page**

**It is our policy to honor the confidentiality of each research proposal to protect investigators from having their ideas exposed to unnecessary critique and discussion. However, during review, the reviewer may make discrete inquiries on protocol mechanics if it improves the quality of his/her evaluation, so long as the source and nature of the work is undisclosed.**

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| **Project #** |  | | | | **(SHIC use only)** | |
| **Category:** | **Diagnostics** | | | | | |
| **Project Title:** | | |  | | | | | |
|  | |  | | | | | | |
| **Principal Investigator and Title:** | | | |  | | | | |
| **Institution:** | |  | | | | | | |
| **Address:** | |  | | | | | | |
| **City, ST ZIP** | |  | | | | | | |
| **Phone:** | |  | | | | **FAX:** | |  |
| **Email:** | |  | | | | | | |

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| --- | --- | --- |
| **Co-Investigator(s)** | **Institution, City, State** | **Email address** |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |

**Please provide no more than 2 pages,** **single spaced, typed in 10-point font size, Times New Roman font, with margins of .5” on left, right, top and bottom to respond to the Matrix antibody detection call for preproposals.**

**ONLY 2 PAGES WILL BE REVIEWED AND USED FOR A FULL PROPOSAL REQUEST DECISION.**

**The preproposal should contain the following information:**

1. **Identify the Swine Disease Matrix pathogen(s) of interest for this critical work.**
2. **Identify the laboratory with an appropriate level of biosecurity if the work is to be done in the U.S. or identify the federal, allied industry or university coinvestigators or collaborators that have partnerships in other countries that can give access to known endemic or experimentally infected positive populations of animals for use in the project.**
3. **A brief description of the fitness for use of existing antibody detection tests and the justification of why a new or modified antibody detection test is needed.**
4. **A description of the antibody detection technology proposed to be used.**
5. **A brief description of the methods proposed to be used in the assay development.**
6. **A preliminary estimate of the expected cost to the Swine Health Information Center to conduct this work.**