**CAPNETZ Clinician Scientist Program**



**Step I: Preliminary Application**

***Note:*** *Applications that have been completed in full will only be taken into consideration. Additionally, applicants are advised to ensure that their application meets the funding criteria.*

*Please use an* ***easily readable*** *document layout: A4 pages, Calibri 11 or equivalent, single spaced, 2cm margins, numbered pages; for figure and table, minimum Calibri 9 or equivalent. The text in grey is to be deleted.*

**1. Applicant**

|  |  |
| --- | --- |
| **First Name/Last Name** |  |
| **Academic Degree** |  |
| **Date of Birth** |  |
| **Institution** |  |
| **Department** |  |
| **Street/House number** |  |
| **Post code** |  |
| **City/Town** |  |
| **Email** |  |
| **Phone** |  |

**2. Project Title**

|  |
| --- |
|  |

**Acronym:**

**3. Mentor/Supervisor**

|  |  |
| --- | --- |
| **First Name/Last Name** |  |
| **Academic Degree** |  |
| **Institution** |  |
| **Department** |  |
| **Street/House number** |  |
| **Post code** |  |
| **City/Town** |  |
| **Email** |  |
| **Phone** |  |

**4. Additional Mentor/Supervisor/leader of the working group**

|  |  |
| --- | --- |
| **First Name/Last Name** |  |
| **Academic Degree** |  |
| **Institution** |  |
| **Department** |  |
| **Street/House number** |  |
| **Post code** |  |
| **City/Town** |  |
| **Email** |  |
| **Phone** |  |

**5. Other members or persons directly involved in project (co-workers, collaborators)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Country** | **University or Institution** | **Last Name** | **First Name** | **Current position** | **Role in the project** |
| Germany | X, Y, Z |  |  |  | *Collaborator (e.g., microbiologist)**Tasks X, Y, Z* |
|  |  |  |  |  |  |

**6. Research Proposal**

**6.1 Objectives and research hypothesis (1500 characters)**

*Present the objectives and the research hypothesis; present the scientific and technical barriers to be lifted; present the expected results; if applicable describe any final products developed.*

*The focus of applications should be in line with the purpose of CAPNETZ STIFTUNG: to promote research in community-acquired pneumonia (CAP) and its translation into benefits for patient care. For accomplishing the objectives, clinical data and biobank of CAPNETZ study should be used. Any deviation from this must be substantiated with solid justification.*

**6.2. Background including own preliminary data directly or indirectly applicable to the objective of the proposal (2000 characters)**

*Provide a summary of any preliminary work conducted by the Principal Investigator(s) that is relevant to this application. In addition, include information that demonstrates the competence and experience of the investigator(s) to conduct the proposed study.*

*Include graphs/figures at the end or in an annex.*

**7. Project milestones, experimental design and methods (2000 characters)**

*The specific outputs, timeline of the project (e.g., (e.g., output in 6, 9 and 12 months), project management*

*A comprehensive account of the experimental design and procedures to be employed in order to achieve the specified aims is required. Please provide a detailed discussion of the following aspects: the study hypothesis; the primary and secondary outcome measures; the study sample, including the inclusion and exclusion criteria; the estimated sample size; the gender distribution; the randomization scheme (if applicable); a description of the experimental procedures and schedule, including a study timeline; the drugs and dosage; the measures of compliance; the follow-up schedule, including a study timeline; the efficacy and safety evaluation; the data monitoring and quality control procedures; and a description of the proposed data analysis and statistical procedures for hypothesis testing.*

*If clinical material or clinical data are provided by third parties (outside the CAPNETZ network), a valid justification must be included. Sample size: To facilitate the evaluation of your sample size estimates, please provide any estimates of means, standard deviations, rates or proportions used to calculate each of your sample size or power estimates. In the statistical section, please indicate whether a one-tailed or two-tailed test is used, the power selected for such a test (if a sample size calculation is performed), and the reference for the sample size or power calculation.*

*In the case of pilot studies where some of these parameters are unknown, estimates for these parameters may be provided if preliminary data are not available and a formal sample size calculation for a larger study has not yet been performed. It is essential to indicate whether the estimates are based on data or personal estimates.*

*If the proposed project involves collaboration with individuals outside the applicant's research group, a description of the planned working relationships must be provided. This description should be accompanied by letters of intent signed by them as well.*

**8. Outlook: Proposed project relevance to CAP and other respiratory diseases (1000 characters)**

*How relevant this project is to CAP? Describe the innovative aspect of this project and how it is expected to address knowledge gaps in understanding disease pathogenesis or clinical care of CAP.*

**9. Cost estimate**

Note 1: Excluded from funding are: application preparation costs, financial support for secretarial assistance, buildings and facilities and general administration, and general laboratory equipment procurement.

Note 2: In addition to the actual financial costs incurred, the TV-L/TVÖD salary level for full-time or 50% employment (standard German salary scale for personnel costs) should also be indicated, including the duration of the employment contract.

Note 3: The funding provided by CAPNETZ STIFTUNG is a non-commercial research grant and therefore is not usually subjected to institutional overhead costs.

|  |  |
| --- | --- |
| **Own salary**  |  |
| **Consumables** |  |
| **Travel** |  |
| **Miscellaneous costs** |  |
| **Total funding** |  |

**Comments/justification for cost estimate**

|  |
| --- |
| *Costs linked to salary of Clinician Scientist or outsourcing/subcontracting services (e.g., DNA/RNA sequencing) should be justified in relation to the scientific objectives.* |

**Signature**

The undersigned confirm that they agree to the grant application, will participate in the project and will conduct the project according to Good Laboratory Practice and the applicable regulatory requirements (e.g. with regard to animal studies or experiments involving gene technology).

**Clinician Scientist Fellow**

**Name: ………………………………………………. Signature:…………………………………………**

**Place, Date: ……………………………………**

**Attachment (Include all these relevant documents as a single pdf to project proposal)**

☐ Curriculum vitae with list of scientific publications (please prepare your CV based on DFG template (https://www.dfg.de/de/formulare-53-200-elan-246806).

☐ A nomination of the supervisory committee (mandatory one supervisor, optional one independent mentor) and one-page write up of a long-term concept for achieving scientific independence

☐ Approval of the application by the supervisor and management of the home institution incl. confirmation of the applicant's personal data, provision of laboratory resources and employment in a clinic for the funding period (12 - 24 months)

☐ Confirmation of eligibility/specialist training

☐ Copy of employment contract

☐ Copy of medical degree certificate

☐ Copy of doctoral certificate

☐ If applicable/possible: statement of support from collaborators, confirming their willingness to participate and/or provide clinical samples without compromising the anonymity of patients

☐ If applicable: Proof of career delays

**Please fill this form, add necessary attachments and send it as one PDF document via e-mail to science@capnetz.de**

**10. Literature Cited:**

|  |
| --- |
| *References should be numbered in the sequence in which they appear in the text and listed at the end of the research plan. Each citation must include the names of authors, title, the name of the journal or book, the volume number, the page number and the year of publication.* |