**Audrey Holland Endowed Award**

The Audrey Holland Endowed Award has been established to support undergraduate and graduate students to design and conduct research in the Department of Communication Science and Disorders. The awardee may use the award for research related supplies and equipment, subject participation, statistical support, travel to present research findings, and other related items.

**How to compete for this award**

The award is competitive and all CSD students are eligible. Students conducting or planning to conduct research in the current academic year should self-nominate. **For 2018, the award will be in the amount of $900.00** which is to be used to offset expenses in the research budget.

**ELIGIBILITY**

* CSD undergraduate or graduate student
* Research for which the award is being sought must meet **one** of the following criteria:
1. **Already-IRB approved human subjects research:** Studiesthat have been approved by the University of Pittsburgh Institutional Review Board (IRB) under full board review, expedited review or exempt status.
2. An active and approved IRB number will be required in the application
3. **Human subjects research** **in the process of being prepared for IRB submission:** Studies eligible for full board review, expedited review or exempt status, that are sufficiently complete in their design as to be ready for IRB submission. The committee will also judge the application’s readiness for IRB submission.
4. **A design that does not involve human subjects and therefore does not require IRB approval**.
5. Examples include systematic review or meta-analysis.
* **Student** researcher-applicant **must have a faculty mentor actively involved in the research**, **who will indicate their support of the research with their signature** on the application.
* **Applications must be received by noon on November 1st, 2018.**

**APPLICATION PROCEDURES**

Download and complete the application template electronically (available at <https://www.shrs.pitt.edu/csd_funding/>) for the Audrey Holland Endowed Award **following all instructions**. The application template also appears below – modify in your word processor with all supporting materials to produce a single document.

The application includes the following items which should be combined into a single Word document in the following order (see below for details):

* 1. The application cover sheet, project title and signature of mentor
	2. Project narrative (see below)
	3. Project budget
	4. The student applicant’s biosketch (NIH Format – include eRA Commons user name if you have one).
		1. See here <http://grants.nih.gov/grants/forms/biosketch-blankformat-Forms-D.docx> for NIH format template
		2. Note the biosketch includes a personal statement

Applications must be submitted **BOTH** **electronically by email** **and by hard copy** (please compile all materials into a **single Word or pdf document**), to the CSD Director of Student Financial Aid and Awards (currently at jcoyle@pitt.edu - mailbox in the CSD office) before noon on the due date. **PLEASE COMBINE ALL COMPONENTS INTO A SINGLE WORD DOCUMENT BEFORE SUBMISSION. ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED.**

**SELECTION COMMITTEE**

The award recipient will be determined by a faculty committee consisting of the directors of the five degree programs in the Department of Communication Sciences and Disorders: CSD Undergraduate, Master’s Degree Program in SLP, Doctor of Audiology (AuD) Program, Doctor of Clinical Science in Speech Language Pathology Program (CScD), and CSD Doctor of Philosophy (Ph.D.) Program.

* Committee members serving as research mentors for students submitting applications for the Audrey Holland Endowed Award will recuse themselves from the selection committee.
* Each member of the committee will score submissions based on the criteria listed below, with the application receiving the “best” scores receiving the award. Scoring system is based on F31 scoring criteria.
	+ Each committee member will generate two scores: one score for the Applicant’s merit, and one score for the project’s merit, using the score form
	+ The average of applicant and project scores will be the basis of the final score for the application.
	+ The application with the best (numerically lowest) score will receive the award.
* In the event of a tie vote, the Department of Communication Science and Disorders Director of Student Financial Aid and Awards will give the tiebreaking vote.
	+ If the director is serving as research mentor for any submitted applications, the Chair of the Department of Communication Science and Disorders will serve as the tiebreaker vote.
	+ Next in line to generate the tiebreaker vote is the CSD Department senior ranking faculty member who is not Director of one of the Academic Programs.
* Incomplete applications will be returned to the applicant for completion if received before the deadline, or rejected if received on the day of the deadline.

Scoring Rubric (adapted from NIH F31 scoring criteria):

|  |  |  |
| --- | --- | --- |
| **Score** | **Descriptor** | **Comments on Strengths/Weaknesses** |
| **1** | Exceptional | Exceptionally strong with essentially no weaknesses |
| **2** | Outstanding | Extremely strong with negligible weaknesses |
| **3** | Excellent | Very strong with only some minor weaknesses |
| **4** | Very Good | Strong with numerous minor weaknesses |
| **5** | Good | Strong but with at least one moderate weakness |
| **6** | Satisfactory | Some strengths but also some moderate weaknesses |
| **7** | Fair | Some strengths with at least one major weakness |
| **8** | Marginal | A few strengths and a few major weaknesses |
| **9** | Poor | Very few strengths and numerous major weaknesses |

**USE THE FOLLOWING FORM TEMPLATE TO GENERATE YOUR APPLICATION. PLEASE MAINTAIN THE TEMPLATE FORMAT (ORDER OF ITEMS). Use the cover sheet (next page) as the first page of your completed application.**

**AUDREY HOLLAND ENDOWED STUDENT RESEARCH AWARD**

**Application Form Cover Sheet**

Student Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Middle Initial: \_\_\_\_\_\_\_\_

Credentials (indicate current highest earned degree): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: Number & Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone number including area code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant is a (check all that apply):

\_\_\_CSD undergraduate student \_\_\_\_\_ (3rd ,4th) year \_\_\_ B.Phil candidate

\_\_\_CSD MA or MS-SLP student \_\_\_\_\_ (1st, 2nd) year

\_\_\_CSD AuD student \_\_\_\_\_ (1st, 2nd, 3rd ,4th) year

\_\_\_CSD CScD student \_\_\_\_\_ (1st, 2nd, 3rd ) year

\_\_\_CSD PhD student \_\_\_\_\_ passed comprehensive exam \_\_\_\_ approved prospectus

Faculty mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TITLE OF PROJECT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IRB approval:**

* 1. **IRB approved (PRO number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	2. **IRB application in progress – anticipated submission date: \_\_\_\_\_**
	3. **No IRB application required: \_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student signature Faculty mentor signature**

**AUDREY HOLLAND ENDOWED STUDENT RESEARCH AWARD**

**PROJECT NARRATIVE (5 PAGES OR LESS):** include purpose of research and plan of execution. Please insert the information in the following outline or create a separate document using this outline. Please add a “Project Narrative” header to each page of the Narrative.

1. **Project Title, Principal Investigator’s Name, IRB project number if approved.**
2. **Objective: What is the overall purpose of this research study?**  (Limit response to 1-2 sentences.)
3. Specific Aims: **List the goals of the proposed study (e.g., describe the relevant hypotheses or the specific problems or issues that will be addressed by the study).**
4. **Background: Briefly describe previous findings or observations that provide the background leading to this proposal.**
5. **Significance: Why is it important that this research be conducted? What gaps in existing information or knowledge is this research intended to fill?**
6. **Methods: Briefly describe the research methods. Be sure to include the items in your budget and how they will be used.**
7. **Innovation: Indicate any innovative aspects of your research proposal or design.**
8. **BUDGET: LIST OF ITEMS FOR WHICH THE AWARD WILL BE USED:** Indicate each item and approximate cost. Please insert the form/table below into your application document after the face/application form page. In the Project Narrative, be sure to indicate where each item fits into the research plan.

 **LIST OF SUPPLIES, EQUIPMENT, SUBJECT PAYMENTS FOR WHICH AWARD IS SOUGHT**

**(Please copy this table and paste into your application document – add rows as needed)**

 **ITEM COST**

|  |  |
| --- | --- |
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OMB No. 0925-0001 and 0925-0002 (Rev. 11/16 Approved Through 10/31/2018)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

| INSTITUTION AND LOCATION | DEGREE(if applicable) | Completion DateMM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

**A. Personal Statement**

**B. Positions and Honors**

**C. Contributions to Science**

**D. Additional Information: Research Support and/or Scholastic Performance**