



JHU SOM Discovery Fund Program Cover Sheet 2017

I am applying for the following award (please check one):

_____ **Synergy Award Program (up to \$100,000)**

_____ **Innovation Award Program (up to \$50,000)**

Project Title: _____

Please list **all personnel** (include e-mail, rank, and department/division/school).

Name	Email	Rank	Department/Division/School
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SOM P.I.:

A PI must be at the rank of Instructor or higher, and may only *submit* or *participate* (receive funding for personnel or research) in a proposal for **one** program. If more than one P.I. is identified, **mark the corresponding P.I. with an asterisk.**

Other Personnel:

Total Budget Request: \$ _____

If this application was also submitted to the one of the Programs administered by the JHU Office of the Provost, please identify which program:

_____ **Provost Catalyst Award Program**

_____ **Provost Discovery Award Program**

Please list up to 5 **Key Words** to help assign reviewers for your proposal:

- 1.
- 2.
- 3.
- 4.
- 5.