**Child Maltreatment Solutions Network**

**Funding Support Request**

The Child Maltreatment Solutions Network (CMSN) is providing limited funding support to Penn State faculty members at University Park and Commonwealth campuses to support activities directly relevant to core mission activities of the CMSN endowment. Broadly, funds are intended to combat the issue of child maltreatment and facilitate interdisciplinary research that advances knowledge to maximize the health and wellbeing of child maltreatment victims and their families.

Funding is available at the following levels:

* + Level 1 -- $5k-$10k

Level 1 funding requests will be reviewed and approved by one CMSN executive committee member and two review board members.

* Level 2a -- $10k-$25k (match to external funding)

Level 2a funding requests will be reviewed and approved by one CMSN executive committee member and two review board members, with final approval contingent on securing external funds.

* Level 2b -- $10k-$25k (stand-alone funding request)

Level 2b funding requests will be reviewed and approved by two CMSN executive committee members and three review board members.

* Level 3 -- $25k+

Level 3 funding requests will be reviewed and approved by the CMSN advisory board.

Please complete all sections below and email the document to Kassidy McElwee, kls662@psu.edu. Proposal requests should be single-spaced, in font size no smaller than 12-point type, left-aligned with one-inch margins. Your proposal should be sent as one PDF document including bio sketches and budget details. Proposals that do not conform to guidelines will be returned to the PI.

Title of Proposal:

**Study Personnel**

Describe the roles of the principal investigator(s), collaborating investigator(s), and any other personnel included in the proposal. For key personnel, include titles and brief descriptions of their expertise. Please add additional personnel sections as needed.

Principal Investigator

Name:

Title:

Department/Organization:

College/Campus:

Phone:

Email:

Tenure Track - Yes/No; if Yes, please include tenure home department.

Expertise related to this project:

Collaborating Investigator(s)

Name:

Title:

Department/Organization:

College/Campus:

Phone:

Email:

Tenure Track - Yes/No; if Yes, please include tenure home department.

Expertise related to this project:

Role on this project:

Collaborating Investigator(s)

Name:

Title:

Department/Organization:

College/Campus:

Phone:

Email:

Tenure Track - Yes/No; if Yes, please include tenure home department.

Expertise related to this project:

Role on this project:

Collaborating Investigator(s)

Name:

Title:

Department/Organization:

College/Campus:

Phone:

Email:

Tenure Track - Yes/No; if Yes, please include tenure home department.

Expertise related to this project:

Role on this project:

 [Please include complete contact information for all investigators in this section]

**PROPOSAL**

Provide a brief summary, no more than 3 pages, of the proposed project. Be sure to include the following items:

1. **Project Aims/Purpose Statement**

Provide a bulleted list of the project aims.

1. Significance:

Provide a brief explanation of the problem being addressed through this project. Explain its relevance to the [CMSN mission](https://www.solutionsnetwork.psu.edu/about-us#:~:text=Our%20Mission,Produce%20new%20knowledge).

1. **Scientific Foundation:**

Briefly summarize existing scientific evidence supporting the proposed work.

1. **Description of Activities/Methods:**

Summarize the project activities, including recruitment, data collection, methods, etc.

1. Translational Research Potential (if applicable):

Describe the translational potential of your project for the prevention, detection, and treatment of child maltreatment and/or promoting the health and wellbeing of child maltreatment victims and their families.

1. **Timeline:**

Provide the anticipated timeline for accomplishing the project’s goals.

**SUPPORTING MATERIALS**

\*This should not be counted towards your 3-page proposal\*

1. **Funding Intended Use and Justification**
2. Describe how you plan to use funding provided by the CMSN (e.g. faculty support, staff support, participant compensation, purchase of data, etc.).
3. Please indicate if this funding is intended to match with other source(s) and list those sources and when they were provided.
4. Please include an itemized budget, see budget template, outlining the total amount of funding requested with a corresponding list of intended expenditures. Make sure to include the total secured from other supplemental funding sources, as well as the endowment portion of funding being requested. Note: If you are requesting funds to pay a salary, the fringe must be included in the amount requested.
5. **Letter(s) of Support**

Provide letters of support from collaborators and co-investigators. If this funding request will include an external agency, please include a letter of support from the agency(s).

1. **Bio sketch**

Provide a brief (1-2 page) bio sketch for all key study personnel.