

# 2020 AGA Research Scholar Awards

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Thank you for your interest in applying for an AGA Research Scholar Award. The questions on this page will determine your eligibility for the awards available this cycle.

## Eligibility Screening Questions

### Are you an early-career investigator?

AGA's research awards program defines "early-career" as follows:

- **MD (or equivalent):** No more than seven years have elapsed between the completion of clinical training (GI fellowship or equivalent) and the start date of this award (July 2020).
- **PhD (or equivalent):** No more than seven years have elapsed between conferment of the degree and the start date of this award (July 2020).
- The earliest date at which your clinical training or terminal degree could have been completed and still qualify is June 2013.

**Note:** An appropriately documented leave of absence, such as parental or medical leave, will not count toward the above seven-year eligibility limit. Exceptional circumstances may also be considered. Exemption requests must be submitted to AGA via email ([awards@gastro.org](mailto:awards@gastro.org)) by 5 p.m. ET on Wednesday, October 23, 2019. If an exemption is granted, AGA will provide an exemption approval letter that must be submitted with the application.

Yes, my training or terminal degree was completed in or after June 2013. ▼

Do you currently have a full-time faculty position (e.g., Assistant Professor or Instructor)?

Yes, I currently hold a full-time faculty position. ▼

Is your faculty position at an institution in North America (U.S., Canada and Mexico)?

Yes, my position is at an institution in North America. ▼

You are eligible to apply for an AGA Research Scholar Award.

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All applicants must be AGA members at the time of application. To retrieve or verify your AGA member number, log in to [www.gastro.org](http://www.gastro.org) or call 301-654-2055.

Enter Your AGA Member Number

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## Principal Investigator Information

First Name

Middle Name

Last Name

Degree (select all that apply)

MD

PhD

MBBS

DO

MBChB

MS

MA

MPH

MBA

Other

## ORCID iD

Insert your ORCID iD as a full https URL. For example, the iD 1234-5678-9123-4567 is entered as:

- <https://orcid.org/1234-5678-9123-4567>

Note: If you do not already have an ORCID iD, you can create one in minutes on the [ORCID website](#).

## Email Address

List an email address you check regularly and that will remain active over the duration of the award. AGA may contact you regarding the status of your application or to request additional information.

## Phone Number

List a phone number with a voicemail system that you check regularly and that will remain active over the duration of the award. AGA may contact you regarding the status of your application or to request additional information.

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Completion Date of Terminal Training or Degree

Indicate the month and year that you completed your clinical training or received your terminal degree. If you have completed multiple fellowships or advanced degrees, report the date for the training/degree completed most recently.

Month

Year

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Current Position/Title

Will you have a new position/title before the start date of this award?

Yes

No

Appointment Date

Enter the date that you were, or will be, appointed to a full-time faculty position. Applicants must have a full-time faculty position before the start date of this award (July 2020).

Current Institution

Institution Address Line 1

Institution Address Line 2

Institution Address Line 3

City

State/Province

ZIP/Postal Code

Country

Will you hold a full-time faculty position at an institution different from your current institution by the start date of this award (July 2020)?

No

Yes

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Sex

Ethnicity

Hispanic origin

Not of Hispanic Origin

I do not wish to identify my ethnicity

Race

American Indian or Native Alaskan

Asian

Black or African American

- Native Hawaiian or Pacific Islander
- White
- Other (please specify)
- I do not wish to identify my race

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### Principal Investigator Disclosure Statement

**Applicants must disclose any arrangements or relationships relevant to the submitted proposal. These may include arrangements or relationships with:**

- A company whose product is featured prominently in the submitted proposal.
- A company making a competing product to one that is featured prominently in the submitted proposal.
- Any organization or entity connected to this funding opportunity (e.g., as noted in the award title or funding acknowledgments).

Yes, I have arrangements/relationships to disclose. ▼

### Disclosures

**In the space below, disclose all relevant arrangements or relationships (e.g., employment, consultancies, honoraria, stock ownership or options, grants or patents received, royalties, or leadership positions).**

### Principal Investigator Disclosure Certification

**I, the undersigned, certify that I have disclosed all relevant arrangements and relationships that are relevant to this proposal. I understand that failure to disclose relevant arrangements and relationships may result in the immediate termination of my eligibility and/or forfeiture of AGA award funds. By typing my name in the field below, I acknowledge that I agree with the above statements.**

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Is your proposal relevant to either of the topic-restricted Research Scholar Awards?

**All eligible applicants will be considered for the AGA Research Scholar Awards, which are not restricted to any area of study relevant to digestive health.**

**View the full requests for applications on the [AGA awards page](#).**

- AGA-Gastric Cancer Foundation Ben Feinstein Memorial Research Scholar Award in Gastric Cancer
- AGA-Takeda Pharmaceuticals Research Scholar Award in Inflammatory Bowel Disease

## Type of Research

Select the category that best describes your proposed research.

- **Clinical Research:** Research involving direct contact with human subjects or using clinical data to address problems related to the prevention, diagnosis, treatment, or outcome of human diseases (e.g., clinical epidemiology). This category also includes research related to health care delivery (e.g., health services, health IT).
- **Basic/Translational Research:** Research with a primary goal of understanding basic biology or disease mechanisms. It can involve animal subjects, cell culture, human biospecimens or human data as resources for laboratory- or informatics-based investigation.

- Clinical Research
- Basic/Translational Research

## Area of Research

Select the category that best describes your proposal's area of study.

Select ▼

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## Project Title

## Abstract

**Provide a summary of the proposed project in 250 words or less.**

Word count: 0 / 250

### Digestive Health Relevance Statement

Describe the relevance of this research to human digestive health in 100 words or less. Investigators should describe how, in the short or long term, the proposed research would contribute fundamental knowledge and/or application of that knowledge to enhance digestive health or to reduce illness and disability among patients with digestive disorders.

Word count: 0 / 100

### Keywords

Provide one to five keywords that best describe the proposed research. Separate keywords with commas.

Word count: 0 / 10

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### Current Percent Effort

What is your current total percent effort dedicated to research?

### Percent Effort on the Proposed Project

What percent effort will you dedicate to this project if you receive funding from AGA?

### Institutional Review

Indicate if your project requires IRB/IACUC approval. Note that if approval(s) is required for the project, a copy of institutional approval must be provided prior to the award start date.

- IACUC
- IRB
- Not Applicable

## Other Personnel Involved in the Research

List individuals other than the principal investigator (i.e., applicant) who are involved in the project (e.g., collaborators and other key personnel), their degrees/credentials and institution, and a brief description of their specific role within the project (2-3 sentences).

**Note:** Biosketches of key collaborators and personnel must be uploaded in the final section of this application (*Required Uploads*).

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Personnel	Action
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No Personnel have been added. [Click on Add Individual below.](#)

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## Mentor's Information

Investigators applying for a Research Scholar Award are required to have a scientific mentor to supervise the research activities.

A NIH biographical sketch is required for the mentor, along with a letter of recommendation that outlines how the mentor will contribute to the investigator's research career development during the award period. Specific details to include in the letter of support are outlined in the *Required Uploads* section of the application.

Mentor's First Name

Mentor's Middle Name

Mentor's Last Name

Mentor's Degree(s)

**Separate each additional degree with a comma.**

Mentor's Position/Title

Does the mentor work at the same institution as the applicant?

- Yes, applicant and mentor work at the same institution.
- No, mentor works at a different institution.

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## Instructions for Applicants

All documents listed below must be uploaded as PDF files. Individual files must not exceed 25 MB. Clearly mark each document with a section header at the top of the first page (e.g., LastName\_ResearchPlan).

Follow the page limits and formatting guidelines provided in the Application Questions section of [AGA's Frequently Asked Questions](#).

Applications missing any of the required documents will automatically become ineligible for review.

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### 1. Specific Aims

The specific aims section is limited to one page. Follow the formatting guidelines provided in the Application Questions section of [AGA's Frequently Asked Questions](#).

Choose File No file chosen

### 2. Research Plan

The research plan is limited to six pages and should include three distinct sections:

- Significance.
- Innovation.
- Approach (including any relevant preliminary data).

The research plan should include sufficient information to evaluate the proposed project independent of any other documents submitted with the application.

Choose File No file chosen

### 3. References

There is no page limit for the list of references. Use the [formatting style](#) of the AGA journal *Gastroenterology*.

Choose File No file chosen

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### 4. Budget

Use the [AGA budget template](#). There is a tab in the template for each year of the three-year award. You must submit a budget for each year. Adhere to the guidelines noted below on allowable and unallowable costs.

The following expenses are allowable:

- Salary and benefits of the principal investigator (i.e., applicant).
- Salary and benefits of research assistants, laboratory technicians or other key personnel.

- Biostatistics, informatics, core facilities or other support necessary for the proposed research.
- Supplies, animals or other materials necessary for the proposed research.
- Equipment, not to exceed \$5,000 per year.
- Travel, not to exceed \$1,500 per year.

The following expenses are not allowable:

- Salary, benefits or other support for the mentor.
- Indirect costs.

For questions related to allowable and unallowable costs, please email [awards@gastro.org](mailto:awards@gastro.org).

Choose File No file chosen

## 5. Budget Justification Narrative

There is no page limit for the budget justification. Follow the formatting guidelines provided in the Application Questions section of [AGA's Frequently Asked Questions](#).

Choose File No file chosen

## 6. Research Facilities and Resources

Using the [AGA Facilities and Resources template](#), describe existing institutional facilities and resources that will be leveraged to support the proposed project. There is no page limit.

Choose File No file chosen

## 7. PI Career Development Plan

Investigators must have a career development plan. There is a two-page limit and you must follow the formatting guidelines provided in the Application Questions section of [AGA's Frequently Asked Questions](#).

The career development plan should address:

### 1. Career goals and objectives.

- Describe your short- and long-term career goals.
- Justify the need for the AGA Research Scholar Award by describing how it will enable you to develop and/or expand your research career.
- Provide a timeline that includes plans to apply for subsequent funding.

### 2. Plan for career development/training activities during the award period.

- Describe the new or enhanced research skills and knowledge you will acquire as a result of the proposed award.
- Describe all structured activities that will be a part of the developmental plan, such as coursework or workshops that will help you learn new techniques or develop needed professional skills.
- If coursework is included, provide course numbers (if available), descriptive titles, and the accrediting institution.
- For each activity, other than research, explain how it relates to the proposed research and to the career development plan. Include the percentage of time dedicated to each activity by year.

For additional guidance, please refer to NIH guideline [PHS 398 Career Development Award, Section 2, Candidate Information and Goals for Career Development](#).

Choose File No file chosen

## 8. PI Biographical Sketch

Use the [NIH Biographical Sketch template \(completed sample\)](#). The biosketch is limited to five pages.

Choose File No file chosen

## 9. Other Biographical Sketches

This section is for the biosketches of the mentor and all key collaborators and personnel listed in the application.

Use the [NIH Biographical Sketch](#) format. Each biosketch is limited to five pages. All biosketches (excluding the PI's) should be combined into a single PDF for upload.

Note: In their Personal Statement section, the mentor must describe their relationship with the PI and their role in the proposed project.

No file chosen

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## 10. Mentor's Letter of Support

This section is for the letter of support from the PI's mentor. The mentor must provide a single letter limited to three pages. The letter must outline the mentor's role and willingness to participate in the project, and explain how they will contribute to the development of the PI's research career. This letter must include:

- The nature and extent of supervision and mentoring of the PI, and commitment to the PI's development that will occur during the award period.
- A plan to transition the PI from the mentored stage of their career to the independent investigator stage by the end of the award period. Define what aspects of the proposed research project the PI will be allowed to take with him/her to start their own research program.
- Discuss expectations for publications, presentations and other developmental activities over the entire period of the proposed project.
- The PI's other institutional commitments, such as their anticipated teaching load during the award period, clinical responsibilities, committee and administrative assignments. Confirm the level of effort (as a percentage or in calendar months) that the PI will dedicate to research.
- Describe the mentor's previous experience as a mentor, including the type of mentoring (e.g., graduate students, career development awardees, postdoctoral fellows), number of persons mentored, and career outcomes.

No file chosen

## 11. Division/Department Letter of Support

This section is for the letter of institutional support from the PI's sponsor (typically a division chief or department chair). The letter must not exceed one page and must verify that:

- The award will be used to provide the PI with protected time for research.
- The institution will provide adequate laboratory space and/or other supporting facilities.
- The institution and the PI will adhere to the terms of the award, including timely and accurate reporting of the awardee's research activities following AGA's progress and financial reporting requirements.

No file chosen

## 12. Additional Letter(s) of Support

Investigators may also submit additional letters of support, for example, to verify commitments from key collaborators. Each letter is limited to one page. If submitting multiple additional letters of support, combine them all into one PDF for upload.

No file chosen

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## 13. Eligibility Exemption

If you received an eligibility exemption from AGA, upload the exemption letter.

No file chosen

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I consent to receive emails from AGA on research awards and other updates via email or post.

You can opt-out at any time by contacting [awards@gastro.org](mailto:awards@gastro.org).

Yes

No

I consent to have my data shared with select AGA partners and third parties.

**AGA values your personal information and has processes in place to keep your details secure. Any parties that we may share your data with are obligated to do the same and will only use it to fulfill relevant services they provide you on our behalf.**

You can opt-out at any time by contacting [member@gastro.org](mailto:member@gastro.org).

Yes

No

I have read and agree to AGA's Privacy Policy.

**AGA's Privacy Policy can be accessed at [www.gastro.org/privacy-policy](http://www.gastro.org/privacy-policy).**

Yes, I have read and agree to AGA's Privacy Policy.