

# STUDY PROPOSAL APPLICATION

## NIH Center for Human Immunology, Inflammation and Autoimmunity

National Institute of Allergy and Infectious Disease

James M. Cherry, Ph.D., Chief of Operations | Iyadh Douagi Ph.D., Scientific Director



### PRINCIPAL INVESTIGATOR / PROGRAM DIRECTOR

LAST NAME	FIRST NAME	SAMPLE AVAILABILITY	CONSULTATION MEETING
POSITION TITLE		IC/AFFILIATION ( <i>abbrev.</i> )	BRANCH/SUBDIVISION
TELEPHONE ( <i>Area code, number and extension</i> )		E-MAIL	

### TITLE OF PROJECT (Format: Year-IC-PI Last Name)

	Consider as a pilot project. Please see CHI website for details regarding pilot projects.	YES	NO
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### SUMMARY OF PROPOSAL AND SIGNIFICANCE (2,000 character limit, approx. 300 words)

Character Remaining:

### ESTIMATE

Please estimate the cost of reagents based on your sample numbers and desired assays. Estimated reagent cost per sample is found on the CHI Website.

COST ESTIMATE:

### SUBMIT with additional attachments

Submit this cover page along with the remaining required information to the [CHI Project Submission System](#). Additional information can be found on the [CHI Website](#) under "How to Submit Your Application".