



**Roybal Center for Personalized Trials**

Physical Activity Promotion to  
Foster Successful Aging

**ROYBAL**

Center For  
Translational  
Research



## Roybal Center for Personalized Trials Pilot Application

Complete the form and email to [RoybalPilotApplications@northwell.edu](mailto:RoybalPilotApplications@northwell.edu)

Name:

Organization:

Contact Phone:

Email:

Impact Statement (Public health relevance- 50 words or less):

Abstract (The project summary is a succinct and accurate description of the proposed work and should be able to stand on its own -250 words or less):



## Biosketch for Primary Investigator:

Instructional Link: <https://grants.nih.gov/grants/forms/biosketch.htm>

OMB No. 0925-0001 and 0925-0002 (Rev. 03/2020 Approved Through 02/28/2023)

### BIOGRAPHICAL SKETCH

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 <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY

#### A. Personal Statement

**B. Positions and Honors**

**C. Contributions to Science**

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

**Detailed Budget for Initial Budget Period:**

Budget information: <https://grants.nih.gov/grants/how-to-apply-application-guide/format-and-write/develop-your-budget.htm#budgets>

Program Director/Principal Investigator (Last, First, Middle):

DETAILED BUDGET FOR INITIAL BUDGET PERIOD	FROM	THROUGH
---	------	---------

List PERSONNEL (*Applicant organization only*)

Use Cal, Acad, or Summer to Enter Months Devoted to Project

Enter Dollar Amounts Requested (*omit cents*) for Salary Requested and Fringe Benefits

NAME	ROLE ON PROJECT	Cal. Mnths	Acad. Mnths	Summer Mnths	INST.BASE SALARY	SALARY REQUESTED	FRINGE BENEFITS	TOTAL
<b>SUBTOTALS</b> →								

CONSULTANT COSTS	
EQUIPMENT ( <i>Itemize</i> )	
SUPPLIES ( <i>Itemize by category</i> )	
TRAVEL Domestic	
INPATIENT CARE COSTS	
OUTPATIENT CARE COSTS	
ALTERATIONS AND RENOVATIONS ( <i>Itemize by category</i> )	
OTHER EXPENSES ( <i>Itemize by category</i> )	

CONSORTIUM/CONTRACTUAL COSTS	DIRECT COSTS	
<b>SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD</b> ( <i>Item 7a, Face Page</i> )		<b>\$</b>
CONSORTIUM/CONTRACTUAL COSTS	FACILITIES AND ADMINISTRATIVE COSTS	
<b>TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD</b>		<b>\$</b>

## Background Questions:

Please answer the questions below in regard to your pilot project.

What is the important public health issue ultimately to be addressed by this research?	
Does this issue affect a specific population? If yes, please describe the population.	
What is/are the hypothesized principle(s) of the proposed intervention?	
How will the hypothesized mechanism(s) of behavior change be measured? How will the principles and mechanisms be tested?	
Are there existing efficacious interventions for this issue in any population?	
Do efficacious interventions for this issue exist in a closely related population?	
If this proposed pilot is successful, what are your anticipated next steps? That is, what is the anticipated pathway through the Stages of intervention development? Also, what are the future plans for the study in terms of funding (e.g, a second Roybal pilot, an R01 proposal, an R21 proposal, etc.)?	
How will this pilot advance science within the portfolio of Alzheimer's Disease & Related Dementias?*	
* Specific to AD/ADRD Roybal Centers	

## Research Aims and Design:

The Research Aims and Design section is the nuts and bolts of your pilot application, describing the rationale for your research and the trial you will accomplish. Though how you organize your application is largely up to you, NIH does want you to: provide a clear overall aim, description of intervention, hypothesis and design, primary outcome and power analysis.

