

# NIH R-Mechanism Mini Guide for Completing SF424 (R&R) Applications Using Grants.gov \*Adobe Forms Version B\*

Please note that this mini guide is a tool for assisting in correctly preparing a grant application using grants.gov SF424(R&R) forms.

**\*\*This mini guide is not a substitute for the official “Grants.Gov SF424 (R&R) Application Guide”\*\*. The official Application Guide should be accessed from the Application Instructions for the specific Funding Opportunity Announcement.**

The applicable section of the Application Guide is referenced in parentheses (e.g., (4.2))

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## *Pre-submission Preparation:*

- Be sure that the PI is a registered user in the **NIH Commons** prior to submitting the proposal. Email OSP for assistance at [sponsored.projects@dartmouth.edu](mailto:sponsored.projects@dartmouth.edu).

## **Required Software:**

- Forms must be completed using a compatible version of Adobe Acrobat or Adobe Reader (a free download from <http://get.adobe.com/reader/>). A list of the current compatible versions may be found at: [http://www.grants.gov/help/download\\_software.jsp#adobe811](http://www.grants.gov/help/download_software.jsp#adobe811).

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## *Downloading the Application:*

- Use the NIH Guide for Grants and Contracts (<http://grants1.nih.gov/grants/guide/index.html>) to locate the funding opportunity announcement (FOA). Selecting the grant opportunity number from the results will open the appropriate download page in grants.gov.
- Follow links to “Download Opportunity Instructions and Application” page.
- Enter your email address to be notified of any changes to the opportunity. (Highly recommended!)
- Save application instructions to local drive.
- When saving the application package this naming convention should be used:  
**Last Name\_ First Name Initial\_ Title Keyword\_NIH**

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## *Important /Before Filling out Forms*

**It is CRITICAL that the information in the PI’s NIH COMMONS profile matches the information on the SF424 R&R form. The PI’s profile should be kept up-to-date!**

- ALL yellow fields **must** be filled in.  
**\*\* FOA instructions and SF424 (R&R) Application Guide should be reviewed CAREFULLY for additional required fields.\*\***
- If a field turns RED after entering data, it means the data entered is invalid (e.g. too many characters, invalid characters, etc.). If this happens you must review the data that’s been entered, and refer to the appropriate section in the SF424 (R&R) Application Guide if necessary.

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## **NIH Format Specifications:**

- ❖ NIH **REQUIRES** all text attachments to be submitted as **PDF (Portable Document Format)** files.

*Some formatting requirements are listed below:*

- Security features should be disabled in the PDF document.
- Turn the “signature” off when you create original documents.
- NIH does not accept PDF documents with editable fields (fields that can be changed).
- NIH also strongly discourages the use of columns in the main text of the research summary.
- NIH will not accept special characters in file names. The NIH system will restrict the file names to allow only characters that are normally valid in URLs. For instance, brackets such as "[" and "]" are not accepted.
  - NIH’s validations will allow the following legal and reserved URL characters:
    - The legal characters in URLs are:
      - A through Z, a through z, and 0 through 9
      - Hyphen (-), underscore (\_), period (.), exclamation point (!), tilde (~), asterisk (\*), accent (^), left parenthesis ( ( ), right parenthesis ( ) ).
    - The reserved characters consist of:
      - Semi-colon (;) slash (/), question mark (?), colon (:), at sign (@), ampersand (&), equals sign (=), plus sign (+), dollar sign (\$), and comma (,)

\* Further information regarding NIH’s PDF file requirements can be found at:

[http://era.nih.gov/ElectronicReceipt/faq\\_prepare\\_app.htm#2e](http://era.nih.gov/ElectronicReceipt/faq_prepare_app.htm#2e)

☞ Do NOT include headers or footers on the PDF attachments (*A header will be system-generated that references the name of the PD/PI. Page numbers for the footer will be system-generated in the complete application, with all pages sequentially numbered.*)

- ❖ Use **Arial, Helvetica, Palatino Linotype, or Georgia** typeface, a black font color, and a font size of 11 points or larger. (A Symbol font may be used to insert Greek letters or special characters, although the font size requirement still applies.)
- ❖ Use at least one-half inch margins (top, bottom, left, and right) for all pages and there must be no more than 15 characters per inch with no more than 6 lines per inch.
- ❖ NO special characters or spaces should be used in file names.

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## Completing the Application:

Select each document in the left-hand “Mandatory Documents” column and click on the “Move Form to Complete” button, moving the document into the right-hand “Mandatory Documents for Submission” column. Select the documents required/needed from the “Optional Documents” column on the left and do the same. All forms that appear in the right hand columns may now be opened and completed.

Complete the form documents in the order presented in the package as some of the information is populated from information entered on previous forms.

**Application Filing Name Field:** Unless the FOA instructions require a specific title, please use this naming convention in the field; **Last Name\_First Name Initial\_Title Keyword\*\_NIH.**  
\* - A word in your title that will identify your project.

### ***SF424(R&R) Form: (section 4.2 in the Application Guide)***

1. Type of Submission
- Select “Application” for all proposals except “corrected applications.”
  - Select “Changed/Corrected Application” when submitting your application to correct errors that were identified by the NIH Commons or to submit a new version of an application before the deadline.
2. Date Submitted: Leave blank as OSP enters the date when it is being submitted
3. State Application Identifier: Leave field blank.
- 4a Federal Identifier:
- Leave blank for new applications
  - **If this is a revised or renewal application, enter the assigned application/award number as the Federal Identifier (for example: CA123456)**
  - For CHANGED/Corrected Application which is a “New” Application, OSP will enter the identifier.
- 4.b. Agency Routing Identifier: Enter the agency-assigned routing identifier per the agency-specific instructions.
5. Applicant Information
- Organizational DUNS: **041027822**
  - Legal name is Trustees of Dartmouth College  
Department: Office of Sponsored Projects  
11 Rope Ferry Road, #6210  
Hanover, NH 03755-1404 \*you must enter 9 digit zip code\*  
County: Grafton  
Person to be contacted on matters involving this application: “Jill Mortali”  
Tel. 603-646-3007 Fax. 603-646-3670 Email: [egrants.gov@dartmouth.edu](mailto:egrants.gov@dartmouth.edu)
6. Employer Identification (EIN): **1-020222111-A3**
7. Type of Applicant: **Private Institution of Higher Education**
8. Type of Application:
- You must select: New, Resubmission, Renewal or Revision.**  
(Refer to section 4.2 of the Application Guide for definitions.)
- 9, 10. This information is pre-populated by Grants.gov. If fields are blank, leave blank.

11. Descriptive Title of Applicant's Project:

**\*NIH limits title character length to 81 characters, including spaces.**

A "new" application must have a different title from any other PHS project with the same PD/PI.

A "resubmission" or "renewal" application should normally have the same title as the previous grant or application. If the specific aims of the project have significantly changed, choose a new title.

A "revision" application must have the same title as the currently funded grant.

12. Start Date and Ending Date: **MM/DD/YYYY**.

13. Congressional District Applicant and Congressional District Project:  
Applicant: **NH-002** for Dartmouth College/DHMC.

14. Project Director/Principal Investigator (PD/PI) Contact Information.

If submitting an application reflecting Multiple PDs/Pis, the individual designated as the Contact PI should be entered here.

The PI name and address in this section must match the employment section of the PI's Personal Profile in the NIH Commons.

- Organization: Trustees of Dartmouth College
- Division: Dartmouth Medical School, Thayer School of Engineering, Tuck School of Business or Arts & Sciences.
- Zip code: Nine-digit Postal Code is now required ( DHMC is 03756-0001) **This requirement applies to all zip code entries in application.**

15. Estimated Project Funding:

- Amounts should be entered once the budget pages are completed.
- a. & c. are usually the same number unless the specific announcement indicates that cost sharing is a requirement.
- b. Enter "0" in this field unless cost sharing is required
- d. Identify any Program Income estimated for this project period if applicable. This field is required. Enter 0 if no project income.

16. Is Application Subject to Review by State Executive Order 12372 Process?

Does not apply to NIH, check "No, Program is not covered by E.O. 12372."

17. Certification: This is required.

18. SFLLL: Standard Form LLL, Disclosure of Lobbying Activities.

- Follow the FOA guidelines

19. Authorized Representative:

- This is the signing official that will ultimately be submitting your application to Grants.gov
- Tel. 603-646-3007 Fax. 603-646-3670. Email: [egrants.gov@dartmouth.edu](mailto:egrants.gov@dartmouth.edu)

20. Pre-Application:

Unless specifically noted in a program announcement, NIH does not use pre-applications.

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***Research and Related Project/Performance Site Location(s) (4.3)***

- Indicate the primary site where the work will be performed.
- Organization: Please enter Trustees of Dartmouth College as our organization.
- If part of the project will be performed at any other location(s), complete each section for each site, including congressional district.
- If you have more than eight locations, provide the information in a separate file and attach.

***Research and Related Other Project Information (4.4)***

- Sections 1-5: Complete the required information
- Item 1a. If IRB in not pending, be sure to enter the protocol approval date and 00003095 as the assurance number
- Item 2a. If **YES** that VERTEBRATE ANIMALS are used, you **must** enter **A3259-01** for the Animal Welfare Assurance number.

**6. Activities Outside US or with International Collaborators Questions**

- 6.a Does this project involve activities outside of the United States or partnerships with International Collaborators?
- Applicants to NIH and other PHS agencies must check “Yes” if the applicant organization is a foreign institution or if the project includes a foreign component. For a definition of a [substantial foreign component](#), see “Definitions” section of Part III: Policies, Assurances, Definitions, and Other Information.
- 6.b. If yes, identify countries
- If you checked the Yes box indicating your project involves activities outside the US, enter the countries with which International cooperative activities are involved.
- (See Part I, Section 4.4 of Application Guide for detailed instructions)

For the following sections (7-11), attach PDF files (no headers, footers, or page numbers):

- Proposal Summary/Abstract (**This section must be no longer than 30 lines of text!**)
- Project Narrative (**2-3 sentences describing relevance to public health, in lay terms.**)
- Bibliography & References Cited

When citing articles that fall under the Public Access Policy, were authored or co-authored by the applicant and arose from NIH support, provide the NIH Manuscript Submission reference number (e.g., NIHMS97531) or the Pubmed Central (PMC) reference number (e.g., PMCID234567) for each article. If the PMCID is not yet available because the Journal submits articles directly to PMC on behalf of their authors, indicate “PMC Journal – In Process.”

- Facilities & Other Resources \* **NEW FORMAT**\*  
(See Part I, Section 4.4 of Application Guide for detailed instructions)

Equipment

- List major items of equipment already available for this project and, if appropriate identify location and pertinent capabilities.

Other Attachments

- Attach a file to provide any other project information not provided above or in accordance with the announcement and/or agency-specific instruction.

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### ***Research and Related Senior/Key Person Profile (4.5)***

Profile for PD/PI

- Credential, e.g. agency login: Anyone assigned the role of PD/PI must enter their NIH Commons log in username
- Attach Biographical Sketch \**Make sure you are using the **Adobe Forms Version B** provided in the SF424 (R&R) Application kit at <http://grants1.nih.gov/grants/funding/424/index.htm>*
- Save the biographical sketch as a PDF file with no spaces or special characters in the filename and no headers or footers
- **\*\*\* New biosketch format highlights\*\*\***
  - **Personal Statement** (*why your experience/qualifications make you well-suited for your role on the project*)
  - NIH **encourages** applicants to limit the list of selected peer-reviewed publications or manuscripts in press to no more than **15**.
  - **PMCID numbers** for publications that fall under the Public Access Policy (see pg I-69 in the SF 424 Application Guide for more information)
- Current & Other Pending Support: Unless otherwise required in a specific FOA, do not include Other Support as this comes at the JIT (Just-In-Time) stage.

Profiles for remaining Senior/Key Person should be entered in alphabetical order. Alphabetical order is preferred, though **not required**. Note: Per NIH “be aware that these profiles will appear in the application in the order provided by the applicant.”

**ROLES:** “Co-PD/PI” is **not** currently used by NIH and other PHS agencies. Do not assign any individual this role. If applicants wish to use the role of “Co-Investigator” or some other similar role, select “Other” for the Project Role field and then insert the appropriate role descriptor in the Other Project Role Category field.

“**Other Significant Contributor**” When identifying OSC’s use the “Other” category and indicate “Other Significant Contributor” as the role in the “Other Project Role Category.” OSCs should be listed last **after** all other Senior/Key Persons have been listed.

**NIH defines Key Personnel:** *The PI and other individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they receive salaries or compensation under the grant. Typically these individuals have doctoral or other professional degrees, although individuals at the masters or baccalaureate level may be considered key personnel if their involvement meets this definition. Consultants also may be considered key personnel if they meet this definition. Key Personnel must devote measurable effort (in person months) to the project whether or not salaries are requested. "Effort of zero person months" or "as needed" are not acceptable levels of involvement for those designated as Key Personnel.*

**NIH defines Other Significant Contributors:** *This category identifies individuals who have committed to contribute to the scientific development or execution of the project, but are not committing any specified measurable effort (in person months) to the project. These individuals are typically presented at "effort of zero person months" or "as needed" (individuals with measurable effort cannot be listed as Other Significant Contributors). Consultants should be included if they meet this definition. This would also be an appropriate designation for mentors on Career awards.*

**Zip Codes:** Grants.gov is enforcing nine-digit postal codes for all US addresses on federal-wide forms. The form will identify a formatting issue if you forget the "plus four" part of the zip code and you can correct it. \*\*The US Postal Service has a Zip Code Lookup <http://zip4.usps.com/zip4/welcome.jsp> tool you might find handy.

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### ***PHS 398 Cover Page Supplement (5.3)***

- 1. PD/PI: This information will pre-populate
- 2. Human Subjects: Answer yes or no to each question.
- 3. Applicant Organization Contact:  
Title: Director  
Address:  
11 Rope Ferry Road, #6210  
Hanover, NH 03755 County: Grafton

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### ***PHS 398 Research Plan (5.5)***

**Research Plan Attachments 1-5**

- Attachments must be PDF files
- DO NOT include headers, footers, or page numbers!

**1. Introduction to Application:** If this is applicable to your application, you must follow the page limits that are outlined in the specific funding opportunity announcement.

**2. Specific Aims:** (1 page)

**3. Research Strategy:**

- Follow **new page limits** (see Table 2.6-1 on page I-22 of SF424 Application Guide)  
(e.g. -R01 = 12 pages, R03 & R21 = 6 pages)

**4. Inclusion Enrollment Report:** For renewal and revision applications *using human subjects*  
(See Part II, Section 4.3 of Application Guide for detailed instructions)

**5. Progress Report Publication List** (Renewal Applications Only)  
(See Part II, Section 4.3 of Application Guide for detailed instructions)

## **Human Subjects Sections: 6-9**

If you answered “yes” to the question “are human subjects involved”, attachments 6-9 must be attached

\* If a section is not applicable to your study, state N/A or Not Applicable in your PDF attachment.

- (See Part II, pg II-4 of the Application Guide “*Supplemental Instructions for Preparing the Human Subjects Section of the Research Plan*” for detailed instructions)

## **Other Research Plan Sections: 10-15**

### **10. Vertebrate Animals:**

- If you answered “yes” to the question “are vertebrate animals used”, attachment 10 must be attached
- See page I-111 in the SF424 Application Guide for detailed instructions on the 5 points that must be addressed

### **12. Multiple PD/PI Leadership Plan:**

- For applications designating multiple PD/PIs, a leadership plan **must** be included.

### **13. Consortium/Contractual Arrangements:**

- If you have a subcontract, please refer to the Application guide for instructions on completing this section.
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### **15. Resource Sharing Plan:**

This section includes Data Sharing Plan, when applicable, and Sharing Model Organisms. Please refer to Application guide for further instructions. The Dartmouth Technology Transfer Office (TTO) provides language they would like the PI's to use for Data Sharing Plans and Sharing Model Organisms. These plans can be found at the following link:

<http://www.dartmouth.edu/~osp/resources/resourcesharing.html>

### **16. Appendix: NIH/AHRQ/NIOSH have set limits on appendix materials. Please refer to notice**

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-018.html> and the Application guide for details.

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## ***PHS 398 Checklist (5.6)***

1. Pre-populated
2. Change in Investigator/Change in Institution Questions: Complete only if this is applicable to your application
3. Invention and Patents: This section is only required on renewal applications
4. Program Income: check “yes” or “no” (If you check “yes” please refer to section 5.6 in Application Guide for instructions on this section)
5. Disclosure Permission Statement: Check “Yes” to provide permission for the government to disclose the title of the proposed project, and the name, address, telephone number, and email address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment). Check “No” if you do not provide this permission. Your response will not affect any peer review or funding decisions.

## PHS 398 Cover Letter Component (5.2)

- Attachment must be a PDF with no special characters or spaces in the file name. This is where Institute/Center and Scientific Review Group requests should be made.

Refer to pg. I-90 in the Application Guide for specific instructions on this section

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## PHS 398 Modular Budget (5.4)

If your budget meets the modular budget format requirement, please complete each budget year.

### Budget Period

Start and End Date should be entered in the following format: MM/DD/YYYY

#### A. Direct Costs

Direct Costs less Consortium F&A

Enter amount of direct costs, less actual Consortium F&A costs for **this** budget period

Consortium F&A

Enter ACTUAL consortium F&A costs in this section for **this** budget period

#### B. Indirect Costs

Indirect Cost Type: Enter MTDC

Enter Indirect cost rate %

Indirect Cost Base: Remember Dartmouth follows Modified Total Direct Costs (MTDC)

\*\*\*Total direct costs **excluding** capital expenditures (buildings, individual items of equipment over \$5,000, alterations and renovations), that portion of each subaward in excess of \$25,000, patient care, rental/maintenance of off-site activities, tuition remission, scholarships and fellowships.

Cognizant Federal Agency

Please enter: **Department of Health and Human Services**  
**Robert I. Aaronson**  
**212-264-2069**

Indirect Cost Rate Agreement Date: This can be found on the Institutional Profile at:

<http://www.dartmouth.edu/~osp/resources/profile-fa.html>

A cumulative budget will be calculated automatically on the third page. (No data entry is allowed in this section.) Errors must be corrected in the source document.

### Budget Justifications:

Modular budget justifications that are applicable must be included

Effort must be shown in number of **person months** (indicate academic, calendar, and/or summer).

Conversion Chart: <http://www.dartmouth.edu/~osp/docs/ConversionChart.xls> to help you convert % effort into person months. “Additional Narrative Justification” section should be used for variations in the number of modules requested.

## ***PHS 398 Research & Related Budget (4.7)***

### ***Sections A & B (4.7.1)***

Budget Type: Select “PROJECT”

Start Date and End Date should be entered in the following format MM/DD/YYYY

### ***Section A - Senior/Key Person(s)***

Do the Project Roles listed for the Senior/Key Persons match the roles listed in the Research and Related Senior/Key Person Profile Component?

Enter the level of effort using **person months** (calendar, academic and/or summer).

*Conversion Chart: <http://www.dartmouth.edu/~osp/docs/ConversionChart.xls> to help you convert % effort into person months.*

Is the fringe rate used correct?

Is the salary cap correct?

If funds are requested for more than 8 Senior/Key Persons, add budget attachment

### ***Section B - Other Personnel***

Enter appropriate role in the blanks if not already provided in the form list.

Is the fringe rate used correct?

Do not include Consultants in this section as they are to be included in Section F.

### ***Section C through E (4.7.2)***

#### **C. Equipment**

- List items of equipment costing \$5,000 or more; items costing less should be included in the “Materials & Supplies” section

#### **E. Participant/trainee Support Costs**

Unless specifically stated otherwise in an announcement, leave Section E blank.

### ***Sections F through K (4.7.3)***

#### **5. Subawards/Consortium/Contractual Costs**

Enter **TOTAL** funds requested for 1) all subaward/consortium organization(s) proposed for the project and 2) any other contractual costs proposed for the project.

Use line 8-10 to describe any “other” direct costs not requested above in sections 1-7. This section should be used if you are including:

- IRB fee
- Tuition remission for graduate students
- Patient care costs

## Section H - Indirect Costs

(see Institutional Profile at <http://www.dartmouth.edu/~osp/resources/profile-fa.html>)

Indirect Cost Type: Enter **MTDC**

Enter Indirect cost rate %

Indirect Cost Base: Remember Dartmouth follows Modified Total Direct Costs (MTDC)

\*\*\*Total direct costs **excluding** capital expenditures (buildings, individual items of equipment over \$5,000, alterations and renovations), that portion of each subaward in excess of \$25,000, patient care, rental/maintenance of off-site activities, tuition remission, scholarships and fellowships.

Cognizant Federal Agency

Please enter: **Department of Health and Human Services**  
**Robert I. Aaronson**  
**212-264-2069**

K. Budget Justification

- This is a single justification for **all** budget years

Don't forget to show level of effort using **person months** (calendar, academic and/or summer)

Conversion Chart: <http://www.dartmouth.edu/~osp/docs/ConversionChart.xls> to help you convert % effort into person months.

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## Research & Related Subaward Budget (4.8)

**\*If your application will have a subcontract/consortium, this component must be completed by each consortium grantee institution.\***

When the consortium institution completes the required budget, their Organization DUNS and Name of Organization fields **must** reflect that of the subaward/consortium grantee

The pre-populated role of PD/PI should be removed and replaced with the role entered in the *Research and Related Senior/Key Person Profile Component*. The PD/PI role should **only** remain IF this person is a PD/PI on a multiple PI application.

The subaward/consortium justification must be part of their budget

\*\*\*Naming convention using the first **10** letters of the consortium organization's name as the file name and leave as "pdf" as the file extension.