

# Research Grant AWARD PROGRAM

*Supporting Grants for Radiologic Science  
Research by Medical Imaging and  
Radiation Therapy Professionals*



ASRT Foundation research grants support new ideas and practices to strengthen the radiologic technology profession and help cultivate the next generation of researchers. Grant recipients have up to two years to investigate their research question. Research grants are awarded in funding levels of up to \$10,000 and up to \$25,000. The \$25,000 level grant is a two-year pilot program launched in 2018.



**Use the electronic  
form to submit your  
Letter of Intent!**

## Award Program Timeline

### Timeline for Spring Grant Round

Jan. 25 Letter of Intent deadline

**Mar. 1 Full proposal due at  
the Foundation**

June 1 Foundation informs PI  
of funding decision

June 15\* Check mailed to PI's institution

### Timeline for Fall Grant Round

June 27 Letter of Intent deadline

**Aug. 1 Full proposal due at  
the Foundation**

Dec. 1 Foundation informs PI  
of funding decision

Dec. 15\* Check mailed to PI's institution

*\*Based on receipt of signed releases.*

# Mission Statement

The philanthropic mission of the ASRT Foundation is to support and empower medical imaging and radiation therapy professionals and students as they pursue opportunities to enhance the quality and safety of patient care.



## Eligibility

1. Proposals may be submitted by an individual or group of investigators through a U.S. Sponsoring Organization/Institution with which they are affiliated. Groups must designate one member as the Principal Investigator (PI) responsible for directing the project. Other members of the group may be from other disciplines that are relevant to the proposed study.
2. All submissions must be done by the PI, who must be a current voting ASRT member with a minimum of two years consecutive membership history at the time of application. A voting membership status must be maintained through the completion of grant funding, and will be verified prior to each release of funding.
3. The PI must be registered to practice in the U.S. in a primary modality by certification agencies recognized by the ASRT (ARRT, NMTCB, ARDMS, MDCB), or hold an unrestricted state license. Verification of current registration/licensure must be demonstrated upon application and prior to each release of funding.
4. Projects may be proposed for a period not to exceed two years. If a two-year request is made, plans for the entire project period must be stated in the proposal.
5. ASRT Foundation Board of Trustees, ASRT Board of Directors, ASRT staff and their immediate family members are not eligible to apply.
6. Previous research grant awardees are eligible to apply.



## Statement of Intent for Funding

ASRT Foundation is dedicated to the goal of improving the quality and safety of patient care. The Foundation accomplishes this goal by providing support to researchers performing research related to the delivery of radiation therapy, dosimetry or medical imaging, including nuclear medicine and sonography. Proposals related to radiologic science education and administration will also be considered if they support the ASRT Foundation mission of enhancing the quality and safety of patient care.

## Terms and Conditions

### Grant Period

A proposed project may have a period of performance of 1- or 2-years. At the time of application, the investigator must request either a 1- or 2-year grant period. A grant year will begin on the date the check is mailed to the PI's institution as defined in the award program timeline for the applicable spring or fall grant round.

### Reporting

1. Grant recipients shall submit progress reports to the Foundation Program Coordinator. For a 1-year grant, one progress report is due 6 months into the grant period. A grant with a 2-year period of performance will require progress reports at 6 months and 12 months. Failure to submit a progress report on time may delay or forfeit the release of the next increment of funding. In addition, the RGAP will review the progress report and make formal recommendations for year 2 funding.
2. A final report shall be submitted within 30 days of completion of the grant period of performance. Failure to submit a final report will bar the recipient from any future Foundation funding as the recipient will not be considered in good standing with the Foundation.
3. Grant recipients are required to submit a final manuscript to Radiologic Technology or Radiation Therapist for consideration of publication in order to disseminate findings of his/her research to the larger professional audience, no later than six months following the completion of the research project.

# Terms and Conditions

## Approval of Changes

1. Changes to the budget shall be submitted by the grantee and approved by the Foundation Board prior to the commencement of any research. The recipient must obtain written approval from the Foundation if expenditures are expected to deviate significantly (see below) from the distribution in the approved budget. If the deviation is significant, a revised budget must be submitted to the Foundation for consideration. The Foundation shall have 30 days to review any request for approval of a revised budget. The Foundation may approve or not approve changes at its discretion.
  - a. Changes equal or less than 20%: The Foundation does not require pre-approval of a departure from budgeted amounts as long as the departure does not exceed 20% in any one line item. However, any departure from the original budget must be explained fully in the progress and yearly reports.
  - b. Changes greater than 20%: Transfers between line item in excess of 20% and requests for expenditures in categories not initially included in the approved budget may be interpreted as representing changes in the overall plan of action. Accordingly, prior Foundation approval is required for all changes in line items of greater than 20%.
2. Changes to the plan of action must receive written approval from the Foundation before any material change in the plan of action, timetable for completion (including no-cost extensions), acquisition of subjects, etc. are made. Requests for changes to the plan must be made in writing. The Foundation shall have 30 days to review such requests and respond in writing to the recipient. If the request is made less than 30 days prior to the next scheduled payment, the monies may be held until approval of any changes is given. A request for additional funding to extend work on an approved Foundation Grant will be treated as a new application in response to a request for proposals. A written request for extension of reporting deadlines with no additional funding, a no-cost extension (NCE), must outline in detail reasons for the request. The request must be received by the Foundation 30 days prior to the expiration of the original grant period of performance. No more than 2, 6 month NCE will be considered by the Foundation.

## Ownership of Equipment

Title to all apparatus, equipment, material, instruments, and products purchased, built, prepared or fabricated by an organization with the Foundation research grant funds will normally vest in the grantee, with the understanding that such equipment will remain in use for the specific project for which it was obtained.

## Distribution of Funds

If you are selected to receive this grant award, the Foundation will send a check for the approved amount directly to the grants administrator of your college, university or medical institution once the appropriate releases have been signed and returned to the Foundation. A final report of expenditures must be submitted to the Foundation when the project is completed. Unused funds must be returned to the Foundation.

## Selection Process

It is the responsibility of the ASRT Foundation Board of Trustees to approve grant recipients. The trustees have established a Research Grants Advisory Panel (RGAP) of medical imaging and radiation therapy professionals to assist in evaluating grant proposals. RGAP members will evaluate the "blinded" proposals according to the Full Proposal Guidelines listed on page four.



# Guidelines for Submission

## Guidelines for Submission



### Full Proposal

If invited to submit a full proposal the PI will receive an email with further instructions on how to submit.

The Foundation will forward the PI a Full Proposal Form. The form is a fillable .pdf document, which must be completed by the PI in order to complete the Full Proposal submission process.

The Full Proposal contains the following required components:

- Abstract
- Supporting budget statement with 1st and 2nd year itemized budget list
- Statement of Problem: Background and significance
- Specific Aims: Objectives, research and significance
- Literature Review
- Proposed Methodology
- Calendar/Timeline
- Personnel
- Facilities and equipment
- Appendices to include CV/Resumes, Proof of Current Credential, Institutional Assurances/ Human Assurances/Institutional Review Board, Cooperating Institutions
- Agreement to submit a peer reviewed article to the Radiologic Technologist or Radiation Therapist to disseminate knowledge gained through the funded research.
- Itemized Budget
  - a. The itemized budget should correspond to the proposed activities described in the narrative section of the .pdf Full proposal document. If research is a two year funded project a budget for each year is required.
  - b. Items such as salaries, wages and travel should be based on principles and policies of your institution. Fringe benefits are not to exceed 30 percent of the budget, regardless of institutional policy.
  - c. Consultant agreements of subcontracts may be used. Your affiliated institution will be responsible for the administration of the agreements and for the accountability of the contractors.
  - d. Funds may also be included for travel necessary to conduct and present the research. Unless they are included in the proposed budget, travel lodging and related expenses will be your responsibility.
  - e. Supporting budget statement: Only justify budget items that are not self-explanatory. If the budget request represents only partial cost of the proposed project, please indicate this and provide the estimated total cost of the proposal. You should also identify other funding resources (excluding indirect costs. If other support is nor already committed, please provide the approximate date of other funding decisions.

### \$25,000 Level Grant Allowances

- **Support for the purchase of major pieces of equipment.** Purchase amount is limited to 20% or less of the total award amount.
- **Funding indirect costs.** Indirect costs are limited to 10% or less of the total award amount.

### \$10,000 Level Grant Allowances

- Grant requests must not exceed \$10,000 and are limited to direct costs only. If you are considering a proposal for more than \$10,000, please contact the Foundation before submitting a proposal.

**Note:** Direct costs of conducting the project may include expendable supplies, nonexpendable equipment, printing and publications and necessary clinical tests and procedures purchased from other laboratories. Items of nonexpendable equipment costing in excess of \$2,000 will be considered only in exceptional circumstances and should be justified with a Supporting Budget Statement, including a plan for disposition of the equipment after the research project has ended.

# Application Form



## Funding Levels:

Tier 1  \$1-\$10,000  
Tier 2  \$10,001-\$25,000  
(two awards per fiscal year)

FOR OFFICE USE ONLY: Application #

## Title of Project:

## Principal Investigator:

Mr.  Ms.  Dr.  Professor  Other:

Name      
Last First MI Credentials / Title

Institution

Mailing Address  Phone (  )

Email

ASRT Member Number

*Please fill out ONLY for Full Proposals do NOT fill out for LOIs.*

## Grant Amount Requested:

First Year \$   
Second Year \$  (if applicable)  
**Total:** \$

## Co-Investigator(s):

Name and Title

Name and Title

Name and Title

## Responsible Officials of Applicant's Institution:

### Grants Administration

Name

Title

Address

Signature

Date

### Academic or Clinical Department

Name

Title

Address

Signature

Date

I certify that I have applied for all necessary approvals by appropriate boards or committees at my institution and will provide proof of final approval prior to receiving funds. I certify that this application contains no misrepresentations or falsification and that the information given is true and correct to the best of my knowledge. I understand that any false statements made herein will void this application and I will be ineligible for support from ASRT Foundation. I hereby authorize the release of all information contained in this application packet as may be required to determine my eligibility for an award. I hereby waive my rights to review any documents pertaining to my application once submitted.

I understand that if these funds are granted, submission will be required of a progress and/or final report to the ASRT Foundation. Any publications resulting from this research must state that the ASRT Foundation funded this project. Papers generated from this grant will be required to be submitted to ASRT peerreviewed publications, Radiologic Technology and/or Radiation Therapist. I also understand that I may be required to present the research findings at an ASRT conference if appropriate.

Signature of Principal Investigator  Date

FOR OFFICE USE ONLY

Application #:

Title:



# Research Grant

LETTER OF INTENT FORM

**1 Provide a statement in support of how your research project supports the ASRT Foundation's mission**

(maximum word count: 50)

**2 State the background and significance of the problem your research will address**

(use AMA reference style for citations, use attachment for reference page) (maximum word count 270)

FOR OFFICE USE ONLY

Application #:

Title:

# Research Grant

LETTER OF INTENT FORM

**3** State the aims and specific objectives your research will address  
(maximum word count: 70)

**4** Provide an overview of your research methodology  
(maximum word count: 270)

FOR OFFICE USE ONLY

Application #:

Title:



# Research Grant

LETTER OF INTENT FORM

**5** Provide a timeline of your project from start to completion

(maximum word count: 40)

**Total Over-all Budget:**

**Salary:**

**Supplies (survey, paper, postage, etc.):**

**Equipment:**

**Misc:**

FOR OFFICE USE ONLY  
Application #:  
Title:



# Research Grant

LETTER OF INTENT FORM

References: