PROTON RESEARCH - PROJECT APPLICATION

Use this form to start a new proton research project. *Please email completed form to ProtonResearch@cchmc.org.*	***Date Approved:*** ***Project ID:*** *To be completed by Proton Staff*	Form Submission Date:

1. RESEARCHER INFORMATION

1a. Principal Investigator:	1b. Position Title:	
1c. Affiliation: ☐CCHMC ☐UC ☐Other If other, please specify:	1d. Department or Division:	
1e. Phone Number:	1f. Email Address:	1g. New Proton Investigator: ☐Yes ☐No
1h. Collaborator(s):	1i. Position Title:	
1j. Affiliation: ☐CCHMC ☐UC ☐Other If other, please specify:	1k. Department or Division:	
1l. Phone Number:	1m. Email Address:	1n. New Proton Investigator: ☐Yes ☐No

2. PROJECT INFORMATION

2a. Project Title:	
2b. Project Contact (Name and Phone Number):	2c. Model Type: ☐*In Vivo* ☐*In Vitro* ☐Both
2d. If *In Vivo* or Both, IACUC Protocol PI, Number, and Approval Date:	
2e. Proton Radiation Type: ☐Conventional ☐FLASH ☐Both	2f. Estimated Irradiation Hours/Days Needed:
2g. Planned Project Start Date:	2h. Planned Project End Date:

3. FUNDING INFORMATION

3a. Is this project funded? ☐Yes ☐No	3b. If funded, type of funding: ☐Internal ☐External	3c. If funded, funding agency:
4c. Will data from this project be used for a grant application, publication, or abstract? ☐Yes ☐No		
4d. If yes, please elaborate:		

4. SUMMARY / ABSTRACT

4a. Briefly summarize the proposed project, outlining the hypothesis and specific aims, research methods, expected outcomes, and impact.

5. BACKGROUND

5a. Is this project a continuation of prior research completed at the Proton Center? ☐ Yes ☐ No

5b. If yes, approximately when was the prior research completed?

5c. If yes, please describe the key findings and outcomes (publications, grant applications, etc.) that resulted from the prior research.

5d. Provide background for the proposed project. Include any relevant background information including data from any preliminary experiments or published works, including work from other investigators.

6. OBJECTIVES & SPECIFIC AIMS

6a. State the broad objectives (e.g., clinical translation) of the proposed project and summarize the expected outcome(s).

6b. Outline the specific aims of the proposed project.

7. SCIENTIFIC APPROACH / METHODS

7a. Describe the scientific approach including project design, timeline, and how the experiments will be carried out.

7b. Describe the experimental plan including proposed irradiations, irradiation type, dose, dose rate, fractionation schema, etc.

7c. Identify the data collection methods to be used including any required measurements, endpoints, analysis techniques, and the biostatistical plan.

7d. Will proton data from this project be compared to data from other types of irradiations such as photon, etc.?
☐Yes ☐No

7e. If yes, please elaborate on the comparator groups and methods.

8. SUPPORTING LITERATURE / REFERENCES

8a. Please list or include links to any publications or literature that are referenced on this application or that have contributed to the knowledge or planning for the proposed project.

9. OTHER PROJECT INFORMATION

9a. Please use this space to provide any other relevant information that was not requested or outlined above.