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| This document is provided to potential applicants for informational purposes only and should not be submitted as an application for the 2022-2023 Sleep Research Program for Advancing Careers. Applications will only be accepted through the [AASM Foundation Grant Request](https://www.GrantRequest.com/SID_5880) online portal. Please refer to the [AASM Foundation Grant Request User Access Guide](https://foundation.aasm.org/wp-content/uploads/sites/2/2018/03/AASM-Foundation-Grant-Request-Account-Access-Guide.pdf) for guidance on setting up an account. |

**About SOAR**

In an effort to expand the field of sleep medicine with highly qualified researchers that will lead breakthrough discoveries in circadian science and sleep research, the AASM Foundation is committed to the growing and supporting the pipeline of sleep scientists by investing in the research careers of new investigators through mentorship and grantsmanship training opportunities.

The Sleep Research Program for Advancing Careers is to launch the research careers of sleep and circadian investigators. By the end of the 10-month Sleep Research Program for Advancing Careers, early career investigators will have the skills and resources necessary to successfully apply for a National Institutes of Health, Veteran Affairs, AASM Foundation career development grant, or equivalent award.

The Sleep Research Program for Advancing Careers provides a travel scholarship for the 2023 Grant Writing Symposia in Miami, FL and SLEEP 2023 in Indianapolis, IN. It will also provide discretionary funds of up to $3,000 to be used towards activities and/or training for developing and submitting a competitive application to the funding agency of their choice.

*Given the ongoing COVID-19 pandemic and restrictions on travel, in-person events may be held virtually. Selected applicants will be notified if the in-person events will need to be held virtually at the start of program.*

**This application is due no later than April 6, 2022 by 11:59 pm Eastern time.**

We encourage potential applicants to contact us early in the application process with questions. Eligibility questions may need to be reviewed by a member of the AASM Foundation Executive Committee, so please allow for at least a 1-week response time for eligibility questions. For all other inquiries, please allow a minimum of two business days for a response. Please note that questions received within 48 hours of the letter of intent deadline may not be answered before the deadline.

*Please note this application CANNOT be modified once submitted. Please review your work carefully prior to submitting. Please review your work carefully prior to submitting. Once submitted, it will be reviewed by staff for completeness. The AASM Foundation reserves the right to make the appropriate determination for incomplete applications.*

**Face Page**

*\*Required before final submission*

**Applicant***\**

*Enter the applicant’s information and institution.*

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| --- | --- | --- | --- |
| Prefix       | First Name       | Last Name       | Degree/Credentials       |
| Position Title      | Email      | Phone      |
| AASM Member Number       |
| Institution      |
| Address      |
| City      | State      | Zip Code      |

Is the applicant from a population that is underrepresented in the scientific workforce, as defined by the [National Institutes of Health and National Science Foundation](https://diversity.nih.gov/about-us/population-underrepresented)? *\**

Choose an item.

**Biographical Sketch**

*\*Required before final submission*

*Upload the applicant’s biographical sketch in the NIH required format. Please use the following link to create an NIH-format Biosketch:* [*NIH Science Experts Network Curriculum Vitae*](http://www.ncbi.nlm.nih.gov/sciencv/)

The following sections must be present in the NIH-format Biosketch:

**A. Personal Statement**
Briefly describe why your experience and qualifications make you particularly well-suited for a career in sleep research. (100 words, max)

**B. Positions and Honors**
List in chronological order previous positions, concluding with the present position. List any honors. Include present membership in any professional organizations, editorial boards, institutional or governmental boards and in particular any AASM task forces or committees.

**C. Contribution to Science**

Include a list of your publication(s) here. We realize that applicants are early-career scientists. Applicants with one or two publications should summarize the key findings of their paper(s) and the importance for this section. Applicants with no publications should describe their contributions to projects that didn’t or haven’t yet resulted (including in-progress projects) in authorship on a manuscript (e.g., I used this method, I conducted the literature review for this paper, I cared for all the animals in this lab, etc.). If an applicant has no actual research or thesis experience, he or she should describe their training to date.

**D. Research Support**

List all funded ongoing and completed research projects with the source of funding, dates of funding, and title of project. Briefly indicate the overall goals of the projects and your role on the project (PI, Co-Investigator, Graduate Student, etc.). Do not include number of person months or direct costs.

**Biographical Sketch\***

*Upload the Biographical Sketch.*

*Formatting Requirements:*

* + *Limited to 5 pages*

**Specific Aims Page**

*\*Required before final submission*

Submit a 1-page document from a current or future research proposal. It should address one or more important unanswered scientific questions related to sleep and/or sleep disorders. The document must have the following components:

* Identified research gap
* Long-term goal of your project
* Central hypothesis
* Aims of your project
	+ List the hypothesis for each aim and how it will be tested
	+ Expected outcomes/deliverables

Alternately, you may submit a formal specific aims page that you have already developed.

**Specific Aims Page\***

*Upload the Specific Aims Page.*

*Formatting Requirements:*

* + *Limited to 1 page, excluding citations.*
	+ *Times New Roman 11 pt or 12 pt font required with all margins no less than .50 inches.*

**Career Plan**

*\*Required before final submission*

Describe future career goals and objectives, particularly as they relate to a career in sleep research. Briefly describe why your experience and qualifications make you well-suited for a career in sleep research. Also include the grant mechanism you are interested in applying for or if you are undecided. Additionally, describe how participating in the Sleep Research Program for Advancing Careers will facilitate your career trajectory and include a timeline for submission of your targeted career development grant.

**Career Plan\***

*Upload the Career Plan.*

*Formatting Requirements:*

* *Limited to 2 pages*
* *Times New Roman 11 pt or 12 pt font required with all margins no less than .50 inches*

**Grant Mechanism\***

Please indicate the grant mechanism for which you are aiming to apply (e.g. NIH K23, AASM Foundation Bridge to Success Grant, VA Career Development Grant). If you have not yet chosen which funding mechanism you would like to pursue, please indicate "undecided".

**Mentoring Expectations/Needs**

*\*Required before final submission*

Include a plan describing the role of current mentors in your research (if any) and role of the Sleep Research Program for Advancing Careers mentor.

This plan should include:

1. The level of experience of all mentors.

2. The skills that you hope to be taught and knowledge to be gained with the Sleep Research Program for Advancing Careers mentor.

**Mentoring Expectations/Needs\***

*Upload the Mentoring Expectations/Needs.*

*Formatting Requirements:*

* *Limited to 2 pages*
* *Times New Roman 11 pt or 12 pt font required with all margins no less than .50 inches*

**Budget and Budget Justification**

*\*Required before final submission*

Complete a budget form if requesting discretionary funds to be used as part of the Sleep Research Program for Advancing Careers. Budget justification should include the rationale for each item listed in the budget form.

Download the fillable SOAR Budget and Budget Justification Form: [SOAR Budget and Budget Justification Form](https://foundation.aasm.org/wp-content/uploads/sites/2/2022/01/SOAR-Budget-and-Budget-Justification-Form.docx)

**Budget and Budget Justification\***

*Upload the Budget and Budget Justification as one document.*

*Formatting Requirements:*

* *Limited to 2 pages total*
* *Times New Roman 11 pt or 12 pt font required with all margins no less than .50 inches*

**Letters of Support**

*\*Required before final submission*

**A. Current or Former Mentor(s)**

Provide letters of support from your current or former mentors, if any. The letters of support from your current mentor(s) should describe their commitment to providing mentorship to you during your career development.

**B. Department Chair or Fellowship Director**

Provide letters of support from your department chair or fellowship director. Fellowship director letter (if applicable) should speak to the applicant’s candidacy for the SOAR program. Department chair letter should document that you will have protected time to participate in the Sleep Research Program monthly webinars, mid-year retreat, and SLEEP 2023.

**Letters of Support**

*Upload the Letters of Support as one document.*

*Formatting Requirements:*

* *Limited to 1 page per letter*
* *Times New Roman 11 pt or 12 pt font required with all margins no less than .50 inches*

**Demographic Questionnaire**

The following questionnaire is **OPTIONAL** for all applicants and is not considered part of the Sleep Research Program for Advancing Careers Application. Applicant responses are not used in the decision-making process and will not be provided to reviewers.

**How will the information be used?**

• The data collected will be used to help us understand the diversity of applicants and to inform the development of targeted equity and diversity efforts in the sleep field.

• The information provided may be shared publicly as part of aggregated data on the combined pool of AASM Foundation applicants and grant recipients.

**Will my individual responses be kept confidential?**

• Your individual responses will not be shared with grant reviewers or be used by AASM Foundation leadership to make funding decisions.

• AASM Foundation staff and leadership agree to maintain confidentiality of all application information. The information provided may be shared publicly as part of aggregated data on the combined pool of AASM Foundation applicants and grant recipients. The AASM Foundation will take the utmost measures to ensure confidentiality and security of the information provided.

**Demographic Questions**

1. **Age (select one)**
* 20-24 years
* 25-29 years
* 30-34 years
* 35-39 years
* 40-44 years
* 45-49 years
* 50-54 years
* 55-59 years
* 60-64 years
* 65-69 years
* 70-74 years
* 75-79 years
* 80-84 years
* 85 years and over
* Prefer not to respond
1. **Race and Ethnicity (check all that apply)**
* Black/African American/African
* Asian/Asian American/Pacific Islander
* White/Caucasian/European
* Latino/Latina/Latinx/Hispanic
* Native American/American Indian/Indigenous
* Other
* Don’t Know
* Prefer not to respond

**If you selected “Other” in question 2, please provide details:**

1. **Gender Identity (select one)**
* Female
* Male
* Non-binary
* Transgender
* Agender/Gender-Neutral
* Don’t Know
* Prefer not to respond
1. **Sexual Orientation (select one)**
* Lesbian or Gay
* Straight, that is, not lesbian or gay
* Bisexual
* Other
* Don’t Know
* Prefer not to respond

**If you selected “Other” in question 4, please provide details:**

1. **Disability (select one)**
* Person with a disability
* Person without a disability
* Don’t Know
* Prefer not to respond
1. **Disadvantaged Background (select all that apply)**
* Were or currently are homeless
* Were or currently are in the foster care system
* Were eligible for the Federal Free and Reduced Lunch Program for two or more years
* Have/had no parents or legal guardians who completed a bachelor’s degree
* Were or currently are eligible for Federal Pell grants
* Received support from the Special Supplemental Nutrition Program for Women, Infants and Children as a parent or child
* Grew up in one of the following areas: a) a U.S. rural area, as designated by the Health Resources and Services Administration Rural Health Grants Eligibility Analyzer, or b) a Centers for Medicare and Medicaid Services-designated Low-Income and Health
* Other disadvantaged background
* None of the above apply
* Prefer not to respond

**If you selected “Other” in question 6, please provide details:**