**Commercialization Incentive Fund**

**2021 Grant Full Proposal**

**Directions:** Please fill in all fields and submit proposal in Microsoft Word format, Arial 11-point font, 10 page limit to mbroome@chla.usc.edu.

**1. Title of Project**

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| **Insert title here:** |

**2. Principal Investigator**

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| --- | --- | --- | --- |
| **Name**  |  | **Title** |  |
| **Department** |  | **Phone** |  |
| **Email** |  |

**3. Abstract –** Provide a brief description of the technology, medical need and the project’s goals.

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| **This information cannot be confidential. (200 word limit)**  |

**4. Project Summary –** Provide a brief, high-level description of the research/project.

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| **Describe the clinical need or problem to be solved, the shortcomings of current solutions, expected outcomes of the proposed project and how these outcomes will add-value to the technology. (1 page limit)** **Identify the next steps toward commercialization if this phase is successful and potential sources for additional funding.** |

**5. Project Plan –** Provide a detailed description of the proposed project (strategy, key experiments and goals), as well as preliminary studies and results.

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| **Detail the project’s relevant milestones and the results you expect to have before moving forward. Also, explain how meeting each milestone will move the project toward its commercialization goals. Be sure to emphasize the novelty and risks associated with the project. Reference any key literature.** |

**6. Commercialization Potential –** Provide a list of all commercial uses for your technology, its potential advantages over existing products, and potential commercialization partners.

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| **For clinical projects, provide information on the potential impact of your technology on the standard of care and industry norms. Identify end user, barriers for adoption, regulatory issues, payor and billing codes. (1 page limit)**  |

**7. Budget Summary –** Provide a budget for the work proposed herein.

Award recipient is required to develop a detailed, mutually acceptable budget. Please note that funds cannot be applied towards the purchase of equipment, computers, travel, or Principal Investigator salary support at CHLA or that of a collaborator at another institution. (1 page limit)

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| **Category** | **Amount Requested** |
| **Internal Funding (includes supplies, reagents, animals, part of tech salary allocated towards the project)**  |  |
| **External Consultants and Services (CROs)** |  |
| **TOTAL** |  |

**8. Intellectual Property**

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| **List any patent applications or issued patents you may have for this project.** |

**9. The Team (Children’s Hospital Los Angeles and external including the CROs) –** Provide a short bio for the Principal Investigator(s) and a list of all the participants, listing their expertise and their proposed contribution to the project.

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| **Please indicate who will be responsible for the key tasks, reporting requirements and communication with Office of Technology Commercialization. You may provide URLs for biographical information.** |

**10. Publications –** Provide 1-2 key publications and make sure to send PDFs of the publications along with the full proposal.

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| **We may need to contact experts external to CHLA in order to discuss your technology in a non-confidential manner. Are there individuals you’d like to suggest we speak to in regard to your technology? Are there individuals that we should not contact? If so, please explain why.** |