**SCHOOL OF MEDICINE**

 **BRIDGE FUNDING PROGRAM**

***Application Cover Sheet***

# Principal Investigator Name

**Academic Title Faculty Series**

**Department Department Chair**

**Date of Initial UCSF Appointment**

**E-mail Telephone**

**Grant Administrator Department Manager**

# Proposal Title and Grant Number (include the score you received)

**Bridge Funding Cycle #**

**Funding Amount Requested**

Please select the eligibility criteria under which you are applying:

Established Investigator (> 8 years as a UCSF faculty member)

New Investigator (< 8 years as a UCSF faculty member)

Please list the award(s) to be bridged below. If more than two awards/applications are to be bridged, or if there are other unique circumstances, please comment briefly in the box below.

**Proposal Title and Grant Number** (include the score you received)

**Total Direct Costs per Year Priority Score and Percentile**

**Funding Payline If funded, earliest start date**

**\*Please attach your Summary Statement.**

**The summary statement, priority score, percentile and funding payline MUST BE PROVIDED.**

**If this information is not provided, your application will be considered INCOMPLETE. \***

**Proposal Title and Grant Number** (include the score you received)

**Total Direct Costs per Year Priority Score and Percentile**

**Funding Payline If funded, earliest start date**

**\*Please attach your Summary Statement.**

**The summary statement, priority score, percentile and funding payline MUST BE PROVIDED.**

**If this information is not provided, your application will be considered INCOMPLETE. \***

Please report the amount of discretionary funding (e.g. startup, gift, endowed chair, etc.) that will be available as of **the first day of the Bridge Funding award period** for the applicant's research program. A specific amount, even if it is zero, must be provided.

For applicants who are awarded bridge funding, they must rely on discretionary (including start-up) funds until the discretionary fund balance is <$60,000. When the discretionary fund balance is less than $60,000, award recipients may they begin to use bridge funds.

# Discretionary Funds

 **Comments**

The Department Chair's signature verifies the accuracy of the current and pending support information. The Dean's Office may request verification of the financial reported in the application.

**Department Chair Signature**

**Printed Name**