|  |  |
| --- | --- |
| **Title of Proposal** | |
|  | |
| |  | | --- | | **Nature of the proposal**: | | Please select  [ ] Basic Science Research  [ ] Clinical/Translational Research | | |
| **Principal Investigator** | |
| Name |  |
| Job Title |  |
| Email and Phone Number |  |
|  |  |
| |  |  | | --- | --- | | **Institution / Country** |  | | **PNRC member since:**  **Other Association Memberships:** |  | | **Degrees / Diplomas** (including year conferred): |  | | |
| **Co-Principal Investigator** | |
| Name | Job Title and Institution |
|  |  |
| |  |  | | --- | --- | | **State** |  | | **PNRC member since:** |  | | **Degrees / Diplomas** (including year conferred): |  | | |
| **Co-Investigators** (please add additional rows as needed) | |
| Name | Institution |
|  |  |
|  |  |
|  |  |
| **Major field of interest / Personal statement (each PI should provide requested information)** (200 words maximum for each): | |
|  | |