**The Resident must work with the Business Office** to prepare the budget and obtain institutional approval prior to submitting any application.

The grant submission timeline is as follows:

* 30‐60 days prior to due date: Notify Business Office of intent to submit.
* 22 days prior to due date: Begin working with Business Office on Budget. Begin by completing the Grant Information sheet.
* 12 days prior to due date: Submit all final administrative documents to Business Office for review and processing.
* 2 days prior to due date: Application should be ready for submission by 11am.

**The Resident must also work with Alisa Cooperstein** to obtain GME office approval to submit.

**WU internal process for a Resident Application**

The Resident’s Mentor will be listed as the proposal’s PI internally. The Resident will be the PI in the actual application to the agency. When awarded, the NOA will typically list the resident’s name as the PI but when the fund is set-up, the grants office will list the mentor as the PI of the fund. This is because the mentors are ultimately responsible for the project/fund.

**Resident Budgets/Science**

Resident budgets and science must be reviewed and approved by the CRC. If residents were not aware or are unsure of the process, have them contact Tonia Thompson [thompsont@wustl.edu](mailto:thompsont@wustl.edu).

**Resident Effort/Budget Justification**

We cannot list specified effort for a Resident. The budget justification should read:

Resident Name: Serves as the (insert Role) for this project. After review by the Mentor, Residency Director, and Director of Clinical Research, we are confident that Dr. XXXX will be have sufficient time to complete the project proposed in this application.

**Non-Ortho Faculty and Staff Effort**

Non-Ortho faculty and staff cannot be listed on applications without prior approval from their departments’ administration. The Ortho Research Admin Team will request these approval(s).

*Please note that most departments will not allow their faculty and staff to be listed without salary support corresponding to the listed effort.*

**Resident Acknowledgement**

The following must be completed and sent via email from the resident to the Business Office grants team with the mentor cc’d:

Resident’s Name:

Mentor’s Name:

Agency:

Program:

Title:

Due:

Duration of grant:

I understand that before WUSM will sign off on the above referenced application WUSM is requesting that I acknowledge that the above referenced application does not adhere to current WUSM policies. The following issues must be resolved prior to WUSM accepting an award:

* Current policy dictates that the PI of any grant application be a WUSM employee. I am currently a BJ or SLCH resident and will not be on a WU rotation at the time of the grant. I am not a WUSM employee and therefore, WUSM in conjunction with the department of Orthopaedic Surgery, will need to work out a resolution as to how this award, if issued, will be administered.
* Since I am not a WUSM employee, WUSM stewardship of this award, if issued, will need to be defined to ensure that funds are utilized in the manner proposed and that the terms and conditions as outlined by the sponsor are adhered to.

**Submit a Financial Disclosure Statement**

Please complete and submit an FDS. The grants office will not approve application submission until your FDS is completed.

<https://research.wustl.edu/submit-financial-disclosure-statement/>