



2018 Nomination Information Form-V Scholar Grant Call for Applications (All Cancers)

Upload this completed form to <http://www.jimmyv.org/V-Scholar-Nomination>

DUE APRIL 2, 2018

Nominee Contact Information (note - please enter data in right side column):

First and last name (including degrees):	
E-mail address:	
Phone number:	
Mailing address:	
Is your SOLE nominee eligible for funding from the Stuart Scott Memorial Cancer Research Fund? We encourage, but do not require, applicants that identify as someone from a minority ethnic group who is <u>underrepresented in science</u> (for the purposes of this application: African American or of African descent, Hispanic American (non-European) or Native American and/or an Alaskan Native). Does your applicant qualify as a minority under these criteria? Y/N	Yes or No

Project title:

Legal name of the research institution or medical system to which the grant will be made - *as the name should appear in the grant contract*:

Grants office contact:

Grants Officer Name:	
E-mail address:	
Phone number:	

Mailing address:	

Award payment information:

Tax ID for the research institution:	
Legal "Pay to" institution name for the check:	
Name of person to whom the award check should be directed:	
Mailing address for the check:	

Public Information Office contact (so we can better publicize the PI's work):

Name of contact:	
Title:	
Email address:	
Phone number:	
Mailing address:	

I am the Cancer Center Director, or comparable official responsible for the internal nominee selection process. By my signature, **I am certifying that this nominee meets all applicant eligibility criteria:** (Please provide electronic signature below or print, sign and return the completed form to the V Foundation for Cancer Research.)

Name and title of administrative official

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Signature of administrative official (Please note: if you have any difficulties with this field, print the form, sign it, and return the completed form to the V Foundation.)

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