



COVER PAGE

Name of Research Award Project Title Award Period Covered By This Report

Name of Award Recipient Current Position/Title Sponsoring Institution Street Address

City
State
ZIP/Postal Code
Contact Phone Number
Email Address

I certify that the foregoing information is correct, and that this research has been conducted in accordance with the CDF Research Award Guidelines and the terms outlined in the award contract. I understand that the information provided may be shared by CDF with current and potential donors.

Award Recipient's Signature:
Date:
Sponsor's Signature:
Date:
Institution Grant Officer's Signature:
Date:





Overall Instructions: Responses to the following items should be appended on separate sheets. Please observe the space limitations, and include 1) your name, 2) the award name, and 3) the section of the report being addressed on the header of all supplemental materials. Return the report to icureceliac@celiac.org as a single PDF.

I. Fully Executed Cover Page

This report should be completed by the award recipient and corresponding grants administrator, then reviewed and verified by the Division Chief/Department Chair. CDF will consider progress reports incomplete without all signatures requested on the cover page.

II. Scientific Progress Report

In no more than two pages (single-spaced), summarize your scientific accomplishments during the award period. Describe how your findings relate to the specific aims of the original application, as well as any changes in research direction that occurred during the term of the award or the effect that the results may have on patient care (if applicable). Describe any specific techniques or skills that you acquired as a result of this award.

III. Lay Project Summary

In less than one page (single-spaced), summarize the scientific accomplishments during the award period in language that is accessible to non-scientific ("lay") audiences.

IV. Bibliography

List all publications, scientific abstracts, and invited presentations that have resulted during this award period. Denote those directly related to the research funded by CDF.

V. Concurrent Funding

Attach a NIH PHS 398/2590 Other Support document, listing all active and pending funding for your research activities. Include a project description that is no more than two sentences and indicate any funding that may have overlap with your support from CDF.

VI. Honors

List any prizes or other honors that you have received since the start date of your Research Award funding.

VII. Personal Statement

In less than a half-page (single-spaced), describe how this award has benefited your career. If appropriate, please state how the award has influenced your career decisions and/or academic advancement.

VIII. Biographical Sketch

Attach your most recent NIH Biosketch.

IX. Financial Report

This section must be completed by the grants officer whose signature is on the cover page. On institution letterhead, please include a report of all expenses made with award funds, note any accrued interest on award funds, and note any irregularities in processing of funds as an attachment in the final PDF file report.