

**UIC** UNIVERSITY OF ILLINOIS  
AT CHICAGO  
**FORM - Letter of Intent to Apply: Discovery  
Grant Program**

Date: 12/11/13

**Office of the Vice Chancellor for Research  
Research Development Services (RDS)**

1737 West Polk Street (MC 672)  
310 Administrative Office Building  
Chicago, IL 60612

Phone: 312.996.4995 Fax: 312.413.0238  
[www.research.uic.edu](http://www.research.uic.edu)  
rds@uic.edu

Please save your LOI as a PDF, naming the file with your surname and program (e.g. Jones.CRB.LOI.pdf) and email to [RDS@uic.edu](mailto:RDS@uic.edu). If you have any questions, please contact [RDS@uic.edu](mailto:RDS@uic.edu) or 996-7036.

**1. Review Subcommittee**

- Basic Life Sciences
- Clinical Sciences
- Natural Sciences and Engineering
- Social Sciences

**2. Does proposal include Humanities PI?**

- Yes
- No

**3. Contact PI Information**

Name (Last, First) : \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Department of (Primary affiliation only): \_\_\_\_\_

College/School: \_\_\_\_\_

**4. Other PIs or Co-Is:** List as follows: Last Name, First Name, Department. If more than one, separate each entry with a semi-colon, e.g. Garcia, Mary, Biological Sciences; Prasad, Michael, Medicine;

**5. Business Manager:**

Name (Last, First) : \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**6. Working Title of Research Project (  Check box if resubmission)**

**7. Keywords Describing Project and Recommended Reviewer Expertise** (please separate each keyword or term with a semi-colon):

**8. Lay Summary:**

By submission of this form, applicant attests that s/he has read and meets the eligibility criteria for this program.