

**Urology Care Foundation
2022 Leadership in Education, Achievement and Diversity (LEAD) Program
PROPOSAL AGREEMENT FORM**

This form must be completed in its entirety and submitted as a PDF file to grantsmanager@auanet.org for the proposal to be accepted and reviewed. **The proposal deadline is Thursday, January 13, 2022 at 5:00 p.m. Eastern time.** Please type all responses except where signatures are requested.

Applicant Section

I am applying for the 2022 Urology Care Foundation Leadership in Education, Achievement and Diversity (LEAD) Program to participate in research career development programs to occur during the two-year award term anticipated as July 1, 2022 – June 30, 2024.

I understand that consideration for the 2022 LEAD program is inextricably dependent on the submission, positive review, and subsequent reporting requirements of my application to the 2022 Urology Care Foundation Residency Research Award, including all activities and obligations associated with that Residency Research Award.

I certify that the statements and information included in my LEAD Program personal statement and on this Proposal Agreement Form are true and complete to the best of my knowledge. If selected for a LEAD Program award, I agree to complete my research project according to the guidelines described in the 2022 Residency Research Award Program Announcement and will fulfill all reporting responsibilities therein. Further, I agree to abide all articulated expectations outlined in the 2022 Urology Care Foundation LEAD Program Announcement, including the following:

- 1) Immediately notifying the AUA Office of Research at grantsmanager@auanet.org if I receive alternative funding, or no longer intend to receive or continue the Residency Research Award.
- 2) Devoting at least an 80% level of effort to the Residency Research Award research project during the award period.
- 3) Acknowledging the Urology Care Foundation and the sponsor in any publication arising from work supported by the Residency Research Award.
- 4) Reporting any changes to the proposed project via ProposalCentral, including any mailing or email address changes, receipt of additional funding, change in project status, or change in mentor and/or personnel involved in the project before or during the award period.
- 5) Attending the Urology Care Foundation Research Honors Program and Reception throughout the two-year award term, to be held at or in conjunction with the AUA Annual Meeting.
- 6) Participating in relevant Office of Research programs, symposia, events, and meetings occurring online, in conjunction with the AUA Annual Meeting, and/or at AUA Headquarters in Linthicum, Maryland.
- 7) Attending the Early-Career Investigators Workshop at least once during the two-year award term.
- 8) Maintaining active AUA membership throughout the two-year award term.
- 9) Completing all interim and final institution, awardee, and mentor reporting requirements.

Applicant Signature

Name

Date

Mentor Section

I certify that the information included in this Proposal Agreement Form and the above-mentioned applicant's proposal is complete and true to the best of my knowledge. I agree to provide mentorship and strong support for both the proposed research project and the applicant's training. I further attest that any funds needed to complete the project beyond those provided by the award are available through my or my institution's funding, and commit to provide any additional laboratory, departmental, and/or institutional resources needed to support the proposed project. I understand that the applicant must maintain at least an 80% level of effort for the duration of the award period, and commit to ensuring this effort. I understand and agree to support awardees participation in and attendance at AUA events and programs as described in the LEAD Program Announcement. I will also fulfill all mentor reporting requirements described in the 2022 Residency Research Award Program Announcement and 2022 LEAD Program Announcement.

All mentors listed on the project must sign.

Primary Mentor Signature	Name	Date
Mentor 2 Signature	Name	Date
Mentor 3 Signature	Name	Date
Mentor 4 Signature	Name	Date

To be completed by the primary mentor only: Please describe your involvement in the development of this proposal (e.g., the extent to which you provided guidance and mentorship to support the applicant, but did not write the proposal for the applicant).

Residency Program Director and Department Chair Section

I certify that the information included in this Proposal Agreement Form and the above individuals' proposal is complete and true to the best of my knowledge. I confirm that the applicant will receive at least 80% protected research time for the duration of the proposed award period. I agree to provide all necessary support for the duration of the award and will ensure that all reporting requirements are fulfilled as described in the 2022 Residency Research Award Program Announcement and 2022 LEAD Program Announcement. I further attest that any funds needed to complete the proposed project, beyond those provided by this award or other resources, are available through the department or institution. I understand and agree to support awardees participation in and attendance at AUA events and programs as described in the LEAD Program Announcement.

Residency Program Director Signature	Name	Date
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Urology Department Chair Signature	Name	Date
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Sponsoring Institution Section

On behalf of the above individuals' proposal and the institution listed below, I agree to fulfill all institutional and financial accountability reporting requirements described in the 2022 Residency Research Award Program Announcement. **I agree that Residency Research Award and LEAD Program funds WILL NOT be used for indirect costs or salary support, or costs for or related to any personnel other than the resident.** The institution recognizes that the Urology Care Foundation does not withhold taxes from the award (federal withholding, social security, local taxes, etc.), and that the institution and/or awardee are responsible for ensuring that appropriate federal and local taxes are accounted for.

Research Project Institution: _____

Institutional Representative Signature	Name	Date
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