GLOSSARY OF TERMS

- **Amendment**: NIH term for revised and resubmitted application.

- **Application**: A request for financial support of a project or activity submitted to NIH on specified forms and in accordance with NIH instructions.

- **Award**: The provision of funds by a sponsor (i.e., NIH), based on an approved application and budget or progress report, to an organizational entity (i.e., LUC) or an individual to carry out a project or activity.

- **Budget Justification**: Narrative providing details on the use of and need for costs presented in an itemized budget. See *Modular Grant* link for restrictions on budget justifications in some NIH applications.

- **Budget Period**: The intervals of time (usually 12 months each) into which a project period is divided for budgetary and funding purposes.

- **Circular A-21**: Cost principles for educational institutions (U.S. Office of Management and Budget).

- **Circular A-110**: Uniform administrative requirements for grants and other agreements with institutions of higher education, hospitals and other non-profit organizations (U.S. Office of Management and Budget).

- **Circular A-122**: Cost principles for non-profit organizations (U.S. Office of Management and Budget).

- **Consortium**: See *Subcontract*.

- **Consultant**: Individual hired to give professional advice or services for a fee, normally never an employee of the applicant institution.

- **Contract**: Agreement whereby the sponsor defines and supports clearly defined activities. This is the most formal type of award, and characteristics include specific deliverables stipulated in negotiations, the sponsor monitors project performance, and technical and detailed financial reports are required.

- **Cooperative Agreement**: Grant-contract hybrid in which both the sponsoring agency and the grantee share responsibility for programmatic management of the project. Substantial sponsor involvement with the recipient during performance of the contemplated activity is anticipated. Specific terms of collaboration are indicated in the agreement, which the ORS will review with the PI. In all other aspects, cooperative agreements follow the policies applicable to grants.

- **Cost Sharing**: Institutional partnership with funding agency in the support of research. This is usually an eligibility rather than a review criterion. Institutional funds used are commonly known as “matching funds.” (Note that all cost sharing at LUC) must be approved prior to submission.
GLOSSARY OF TERMS

- **Council**: Common term for Institute Advisory Board. Each NIH institute convenes such a group to review the decisions of the IRGs for program relevance and need, and to determine institute funding levels. This is the second stage of the peer review process.

- **CRISP**: Computer Retrieval of Information on Scientific Projects; searchable NIH-funded grants database.

- **Direct Costs**: Those costs related to the actual conduct of a research project (salaries, fringe benefits, consultants, equipment, supplies, travel, publications, and service contracts). Direct costs are usually itemized in grant application budgets. See F&A Costs.

- **Equipment**: An article of tangible nonexpendable personal property that has a useful life of more than one year and an acquisition cost per unit that equals or exceeds $5,000. (NIH defines equipment as that which equals or exceeds $5,000).

- **Expanded Authorities**: Federal policy giving greater autonomy to grantees, including the ability to carry-over funds from one budget period to the next. Expanded authorities usually apply to most R (not R41 or 43), P, K, and T series grants. See the NIH Grant Policy Statement.

- **F&A Costs**: Facilities and Administrative Costs (sometimes called Indirect or Overhead). Those costs related to institutional infrastructure, both physical and administrative, that are necessary for research to be conducted (space, utilities, custodial services, security, library services, biosafety, IT, IRB and grants management). These costs are not itemized in grant applications. Typically, F&A costs are calculated as a percentage of all or part of the direct costs. See Direct Costs.

- **Gift**: General support of diverse institutional activities with minimal restrictions on use. Progress and financial reports are not usually required.

- **Grant**: Made to support a specific project designed by the funds recipient. The sponsor has expectations about how the funds are spent. The project usually has stated goals and objectives and deliverables. Deliverables may include formal project reports; financial reports are required.

- **Grant Cycle**: Events occurring from time of application submission to receipt of award. At NIH there are three overlapping grant cycles per year (i.e., three grant deadlines per year).

- **Grant Mechanism**: General purpose of a grant program and guidelines for submitting proposals and managing awarded grants. The guide to NIH grant mechanisms, codes and acronyms is available as a .pdf file here.

- **Grants Management Officer (GMO)**: An NIH official responsible for the business management aspects of grants and cooperative agreements, including review, negotiation, award, and administration, and for the interpretation of grants.
administration policies and provisions. Only GMOs are authorized to obligate NIH to the expenditure of funds and permit changes to approved projects on behalf of NIH.

- **Grants Management Specialist (GMS):** An NIH staff member who oversees the business and other non-programmatic aspects of one or more grants and/or cooperative agreements. These activities include, but are not limited to, evaluating grant applications for administrative content and compliance with statutes, regulations, and guidelines; negotiating grants; providing consultation and technical assistance to grantees; and administering grants after award.

- **Human Subject:** A living individual about whom an investigator (whether professional or student) conducting research obtains data through intervention or interaction with the individual or obtains identifiable private information. Regulations governing the use of human subjects in research extend to use of human organs, tissues, and body fluids from identifiable individuals as human subjects and to graphic, written, or recorded information derived from such individuals.

- **IACUC:** Institutional Animal Care and Use Committee. Oversees all use of vertebrate animals for research and teaching, and establishes policies for ethical animal use and ensures that such use is compliant with federal, state, and local regulations.

- **IRB:** Institutional Review Board. Oversees all research involving human subjects. See

- **IRG:** NIH’s Initial Review Group (Study Section). Conducts the first stage of NIH peer review; the second stage is reviewed by the Council.

- **Investigator:** An individual involved with the principal investigator in the scientific development or execution of a project (also called co-investigator). The investigator may be employed by, or be affiliated with, the applicant/grantee organization or another organization participating in the project under a consortium agreement. An investigator typically devotes a specified percentage of time to the project and is considered “key personnel.”

- **Just-in-Time:** A series of measures aimed at streamlining the NIH grant application and review process. In general, certain kinds of information (e.g., Other Support) are required at time of a grant award rather than at the time of application submission.

- **Key Personnel:** The PI and other individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they receive salaries or compensation under the grant. Typically these individuals have doctoral or other professional degrees, although individuals at the masters or baccalaureate level may be considered key personnel if their involvement meets this definition. Consultants also may be considered key personnel if they meet this definition. “Zero percent” effort or “as needed” is not an acceptable level of involvement for key personnel.
GLOSSARY OF TERMS

- **Matching Funds**: See *Cost Sharing*.

- **Modular Grant**: Streamlined NIH format for grant applications requesting less than $250,000 per year. Intent is to restrict IRG review to scientific aspects of applications.

- **New Investigator**: An individual who has not previously served as a PI on any PHS-supported research project other than a small grant (R03), an Academic Research Enhancement Award (R15), an exploratory development grant (R21), or certain research career awards directed principally to physicians, dentists, or veterinarians at the beginning of their research careers (K01, K08, and K12). Current or past recipients of Independent Scientist and other non-mentored career awards (K02 and K04) are not considered new investigators.

- **Notice of Grant Award (NGA)**: NIH’s legally binding document that notifies the grantee and others that an award has been made, contains or references all terms and conditions of the award, and documents the obligation of Federal funds. The award notice may be in letter format and may be issued electronically.

- **NIH Guide**: NIH guide for grants and contracts. This is a weekly listing of Program Announcements and Requests for Applications (RFAs). The NIH guide can be found under the ORS webpage; in addition, individuals may sign up for the NIH Guide listserv, which sends out weekly Guide table of contents.

- **Non-Competing**: This NIH term refers to applications that do not undergo competitive peer review. Commonly used to refer to “non-competing continuation” applications (Progress Reports) requesting funds for next budget periods in a multi-year grant. The PHS 2590 form is used.

- **Overhead**: See *F&A Costs*.

- **Peer Review**: Review of applications for support from the NIH by groups composed of scientists from the extramural research community (as opposed to review by federal/NIH employees).

- **Percentile Rank**: Based on priority score, the application’s rank relative to others reviewed by its IRG at the same and past two review meetings. For NIH Institutions, an application’s percentile rank is the main indicator of merit and basis for determining whether it gets an award.

- **Principal Investigator**: An individual designated by the grantee to direct the project or activity being supported by the grant. He or she is responsible and accountable to the grantee and NIH for the proper conduct of the project or activity.

- **Priority Score**: Average score a proposal receives from an NIH IRG. This is the primary determinant of success. Range is 100 to 300 (lower is better) if 50% of applications are triaged to a “not scored” group.
GLOSSARY OF TERMS

- **Program Announcement (PA):** Within the NIH, Program Announcements have an indefinite longevity, have no funds set aside, and usually use standard grant application deadlines.

- **Program Income:** Gross income earned by a grantee that is directly generated by the grant-supported project or activity or earned as a result of the award.

- **Program Official:** The NIH official responsible for the programmatic, scientific, and/or technical aspects of a grant.

- **Progress Report:** See Non-Competing.

- **Project Period:** The total time for which support of a project has been programmatically approved. The total project period comprises the initial competitive segment, any subsequent competitive segments resulting from a competing continuation award, and non-competing extensions.

- **Rebudgeting:** Making changes to the proposed expenditures for different budget categories (e.g., decreasing budget for supplies and increasing budget for travel). For federal funding, such changes are usually permissible under “Expanded Authorities.” Any requested changes to the budget must be discussed with ORS personnel, who will then request changes from the sponsoring agency.

- **Research Portfolio Online Reporting Tools (RePort):** Reports, data, analysis of NIH research Activities.

- **Request for Application (RFA):** At NIH and other federal agencies, RFAs are one-time solicitations for grant applications, have funds set aside, and have special application deadlines.

- **Request for Proposal (RFP):** Often used synonymously with RFA; however, at NIH, RFPs refer to contracts, not grants.

- **Significant Rebudgeting:** On NIH awards, a threshold that is reached when expenditures in a single direct cost budget category deviate (increase or decrease) from the categorical commitment level established for the budget period by more than 25% of the total costs awarded. Significant rebudgeting is one indicator of change in scope.

- **Small Business Grants:** Funding mechanisms used by federal agencies to encourage research and development in the private sector. NIH SBIR and STTR mechanisms may involve awards to researchers in academia but special conditions apply.

- **Stipend:** A payment made to an individual under a fellowship or training grant in accordance with pre-established levels to provide for the individual’s living expenses during the period of training. A stipend is not considered compensation for the services expected of an employee.
GLOSSARY OF TERMS

- **Subcontract:** A formalized arrangement whereby part of a research project is carried out by a different organization/legal entity. Under the agreement, the grantee must perform a substantive role in the conduct of the planned research and not merely serve as a conduit of funds to another party or parties (see Consortium Agreements in the NIH Grants Policy Statement).

- **Terms and Conditions of Award:** All legal requirements imposed on a grant by NIH, whether based on statute, regulation, policy, or other document referenced in the grant award, or specified by the grant award document itself. The NGA may include both standard and special conditions that are considered necessary to attain the grant’s objectives, facilitate post-award administration of the grant, conserve grant funds, or otherwise protect the Federal government’s interests.

- **Total Project Costs:** The total allowable costs (both direct costs and F&A costs) incurred by the grantee to carry out a grant-supported project or activity. Total project costs include costs charged to the NIH grant and costs borne by the grantee to satisfy a matching or cost-sharing requirement.