



Program Announcement for the Defense Health Agency

Melanoma Research Program Survivorship Research Award

Funding Opportunity Number: HT942526MRPSRA

Pre-Application Due: September 22, 2026

Application Due: October 14, 2026

This program announcement must be read in conjunction with the General Application Instructions, version [CD26_01](#).

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Before You Begin

- **Active [SAM.gov](#), [eBRAP.org](#) and [Grants.gov](#) registrations are required for application submission.** User registration for each of these websites can take several weeks or longer. Each applicant must ensure their registrations are active and up to date prior to application preparation.
- **Read this funding opportunity announcement in the order it is written before beginning to prepare application materials.** It is the responsibility of the applicant to determine whether the proposed research meets the intent of this funding opportunity and that all parties meet eligibility requirements.
- **To support application preparation, additional resources are available** including an application process [FAQ](#), a [Guide for Intragovernmental & Intramural Applicants](#) and a [CDMRP Video Series](#) detailing the application process.

Who to Contact for Support

eBRAP Help Desk

301-682-5507
help@eBRAP.org

*Questions regarding
funding opportunity submission
requirements,
as well as technical assistance
related to pre-application or
intramural application submission.*

Grants.gov Support Center

800-518-4726
International: 1-606-545-5035
support@grants.gov

*Questions regarding
Grants.gov registration
and Workspace.*

This document uses internal links; you can go back to where you were by pressing the Alt + left arrow keys (Windows) or command + left arrow keys (Macintosh) on your keyboard.

Click  to be taken to additional guidance and instructions within the *General Application Instructions (GAI)*.

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1. Basic Information About the Funding Opportunity

Summary: The fiscal year 2026 (FY26) Melanoma Research Program (MRP) Survivorship Research Award addresses the relatively new and underfunded area of melanoma-specific survivorship by supporting a broad range of innovative and impactful research that has the intended outcome of improving the health and well-being of melanoma survivors, their families and/or their care partners in the near term. Proposed studies focusing exclusively on animal models or considering survival only without consideration of quality of life, overall health and/or function are not responsive to this funding opportunity.

Distinctive Features:

- The application **must** include at least one [melanoma consumer collaborator](#), defined as a melanoma survivor, family member and/or care partner who can provide lived experience expertise to the research project team, or a melanoma-community supporting organization to support the planning, execution, and implementation of the proposed research.
- Clinical trials **are** allowed.

Funding Details: The Congressionally Directed Medical Research Programs expects to allot roughly \$2.04M to fund approximately two Survivorship Research Award applications with total cost caps of \$1.02M per award. The maximum period of performance is 3 years. It is anticipated that awards made from this FY26 funding opportunity will be funded with FY26 funds, which will expire for use on September 30, 2032. Awards supported with FY26 funds will be made no later than September 30, 2027.

Submission and Review Dates and Times

- **Pre-Application (Letter of Intent) Submission Deadline:** 5:00 p.m. Eastern Time (ET), September 22, 2026
- **Application Submission Deadline:** 11:59 p.m. ET, October 14, 2026
- **End of Application Verification Period:** 5:00 p.m. ET, October 20, 2026
- **Peer Review:** December 2026
- **Programmatic Review:** March 2027

Announcement Type: Initial

Funding Opportunity Number: HT942526MRPSRA

Assistance Listing Number: 12.420

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2. Eligibility Information

2.1. Eligible Applicants

2.1.1. Organization

[Extramural](#) and [intramural U.S. Department of War \(DOW\)](#) organizations are eligible to apply, ***including foreign and domestic organizations, for-profit and nonprofit organizations, and public or private entities.***

2.1.2. Principal Investigator

The named Principal Investigator (PI) on the application must be an independent investigator at or above the level of Assistant Professor, or equivalent. The investigator does not have to be at an academic organization.

An investigator may be named on only one FY26 MRP full application as a PI.

Independent investigators affiliated with an eligible organization are eligible to be named PI on the application, regardless of ethnicity, nationality or citizenship status.

2.2. Cost Sharing

Cost sharing is not an eligibility requirement.

2.3. Other

Awards are made to eligible ***organizations***, not to individuals. Refer to the GAI for additional [recipient qualification requirements](#).

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3. Program Description

The Defense Health Agency Contracting Activity (DHACA) is soliciting applications to this funding opportunity using delegated authority provided by United States Code, Title 10, Section 4001 (10 USC 4001). The Congressionally Directed Medical Research Programs (CDMRP) is the program office managing this FY26 funding opportunity as part of the Melanoma Research Program (MRP). The CDMRP is located within the Defense Health Agency Research and Development (DHA R&D), which is a part of the Department of Defense, DOD, herein referred to using the secondary title Department of War, DOW. Congress initiated the MRP in 2019 to provide support for research of high potential impact and exceptional scientific merit. Appropriations for the MRP from FY19 through FY25 totaled \$220 million (M). The FY26 appropriation is \$40M.

The vision of the MRP is to prevent melanoma initiation and progression, and reduce hardship. The mission is to support development of earlier interventions to enhance mission readiness, diminish melanoma burden, and improve quality of life for Service Members, Veterans, their Families and the American public.

Studies involving non-melanoma skin cancers are not allowed under the FY26 MRP.

The MRP identified three strategic priorities to ensure that funded research addresses unmet needs and/or underfunded areas of melanoma research and patient care. These three priorities are:

Prevention and Interception: Individuals diagnosed with melanoma have significantly improved prognoses when the disease is diagnosed and treated before it metastasizes. Although primary prevention (use of sunscreen, sun avoidance, etc.) is critical, the MRP seeks to fund research that will lead to improved detection and monitoring capabilities (particularly for individuals at highest risk) as well as inhibition of melanoma initiation, early dissemination, emergence from tumor dormancy and metastases (i.e., interception).

With the exception of studies investigating rare melanomas, the FY26 MRP is not requesting research into established macrometastatic disease or developing treatments for macrometastatic disease.

Rare Melanomas: Rare melanoma subtypes can have distinct characteristics compared to cutaneous melanoma, which makes up the majority of melanoma diagnoses. Rare melanoma subtypes are typically less well-studied, and this has led to a variety of prevention, diagnosis and treatment challenges. The MRP seeks to fund research across the entire cancer research spectrum addressing unmet needs and knowledge gaps associated with rare melanomas.

Survivorship: With the increasing incidence of melanoma and the increased availability of effective treatment options for patients with melanoma, the number of melanoma survivors is also increasing. The MRP seeks to fund innovative and impactful research that advances studies in preservation of function (physical ability), quality of life improvement, symptom management, treatment outcomes and support for psychological and social issues related to melanoma diagnosis, treatment and life post-treatment.

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3.1. Award History

The MRP Survivorship Research Award (SRA) mechanism was first offered in FY24. Since then, 22 SRA applications were received and four were recommended for funding.

3.2. Intent of the Survivorship Research Award

Background:

The widely accepted definition of cancer survivorship spans ***the time from an individual receiving their initial diagnosis through the balance of their life. Under this definition, an individual is considered a melanoma survivor beginning at the time they receive their initial diagnosis.***¹ For the purposes of this award the needs and impact of a melanoma diagnosis on family members, friends and care partners of melanoma survivors are also included within the purview of “melanoma survivorship.”

The concept of melanoma survivorship is relatively new compared to other cancer types and the need for increased investment in melanoma-specific survivorship research is multi-faceted. The Surveillance, Epidemiology and End Results Program estimates that there were approximately 1.5 million people living with melanoma in the United States in 2022, with approximately 166,000 (~11%) of those individuals under 50 years old.² Furthermore, the overall five-year survival rate of advanced, unresectable melanoma can be as high as 50%, due in large part to advancements in immuno- and targeted therapies; there is an increasing number of advanced stage melanoma survivors who are living over 10 years past their initial treatments. Because the incidence of melanoma continues to trend upward and melanoma survivors are living longer, the number of melanoma survivors will continue to increase.

The successes obtained in the advanced disease setting have led to use of immunotherapies at earlier stages (e.g., in melanoma patients with stage II and stage III disease). However, these newer therapies are known to carry risk of acute and long-term toxicities, including immune-related adverse events and cardiovascular and neurologic toxicities. This knowledge is driving the need to better understand and identify patients at risk for developing toxicities to allow for appropriate considerations for benefit versus toxicity risk when choosing treatment regimens.³

Intent of the SRA:

The needs of melanoma survivors are diverse, and no single discipline can address them all. ***The intent of the SRA is to address the relatively new and underfunded area of melanoma-specific survivorship by supporting a broad range of innovative and impactful research that has the intended outcome of improving the health and well-being of melanoma survivors, their families and/or their care partners.*** Applications may propose development of evidence-based practices, behavioral health science, survivor and/or care partner well-being interventions and surveillance, and/or identification of psychosocial survivor outcomes. ***Clinical trials are allowed.***

¹ <https://cancercontrol.cancer.gov/ocs/definitions>

² https://seer.cancer.gov/statistics-network/explorer/application.html?site=53&data_type=5&graph_type=11&compareBy=sex&chk_sex_3=3&chk_sex_2=2&series=9&age_range=1&advopt_precision=1&hdn_view=1#resultsRegion1

³ Yen-Chou Chen et al., “A Brain, a Heart, and the Courage: Balancing Benefit and Toxicity of Immunotherapy in Melanoma,” *American Society of Clinical Oncology Educ Book*. 43:e390594 (2023). doi: [10.1200/EDBK_390594](https://doi.org/10.1200/EDBK_390594). PMID: [37229626](https://pubmed.ncbi.nlm.nih.gov/37229626/).

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Examples of Allowable Research:

The following list outlines areas of survivorship research of interest to the MRP; it is not all inclusive. Applications may propose projects that address other areas of melanoma survivorship not listed below as long as the need for such research is clearly presented in the application materials.

- Preservation of function (physical ability) and symptom management throughout treatment and beyond
 - Understanding and preventing toxicities related to immunotherapies, including immune-related adverse events and cardiovascular and neurological toxicities.
 - Addressing reproductive and sexual health issues.
 - Reducing and preventing other major side-effects of treatment (e.g., lymphedema, fatigue).
 - Addressing physical issues/treatment effects that impact long-term (>5 years post-treatment) melanoma survivors.
- Psychological and social impacts of a melanoma diagnosis and treatment on melanoma survivors and care partners
 - Developing study methods and measures to improve quality of life and overall mental health (e.g., addressing depression, anxiety, “survivors’ guilt”).
 - Assessing the relationship(s) between behavioral and social functioning in relation to melanoma initiation, progression, detection, treatment and rehabilitation.
 - Addressing the psychological impact of fear of melanoma recurrence and multiple primary melanoma diagnoses.
- Treatment outcomes
 - Investigating the impact of alternative medicine, nutrition and lifestyle factors on treatment outcomes.
 - Developing melanoma-specific survivorship strategies and resources.
- Health care delivery
 - Addressing issues related to access to care, including follow-up care.
 - Improving prevention strategies, diagnosis, treatment and outcomes for melanoma survivors, including evidence-based underserved or under-represented populations.
 - Developing strategies to understand barriers to and improve communication amongst providers, patients and their care network.

Proposed studies focusing exclusively on animal models or considering survival only ***without consideration of quality of life, overall health and/or function are not responsive to this funding opportunity.*** Such types of studies may be better suited for submission to other [FY26 MRP Funding Opportunities](#).

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3.2.1. Key Elements for the SRA

Impact: The SRA is intended to support research designed to have a major impact on the health and well-being of melanoma survivors, their families and/or care partners. Impactful research will accelerate the movement of promising ideas into clinical applications or other real-world applications and advance the field of melanoma-specific quality of life and survivorship.

Study Design: Applications should clearly articulate and justify the chosen study design. Studies proposing retrospective analyses or prospective enrollment should clearly describe the architecture of the study (e.g., descriptive, correlational, field experimental, meta-analyses) and the study population(s). The study population(s) should be representative of the people who are anticipated to benefit from the research. If applicable, describe questionnaires in sufficient detail to justify interpretation of potential results.

Melanoma Consumer Collaboration: For the purposes of the SRA, a ***“melanoma consumer” is defined as a melanoma survivor, family member or care partner who can provide lived experience expertise to the research project team.*** Applicants to the SRA **must** collaborate with the melanoma consumer community to maximize the impact and translatability of the research for the benefit of the intended melanoma community(ies).

Collaborative research approaches create partnerships between scientific researchers and melanoma consumers to create knowledge useable by both sets of stakeholders. Recognizing the strengths of each partner, scientific researchers and melanoma consumers collaborate and contribute equitably on all aspects of the project, which may include needs assessment, planning, research design, implementation, evaluation and results dissemination. Collaborative research approaches feature shared responsibility and ownership for the research project to ensure non-tokenistic involvement of the melanoma consumer community members within the research team. Research results are jointly interpreted, disseminated and fed back to affected communities and in some instances, translated into interventions or policy.

Collaborative relationships with the melanoma consumer community may be established through integrating community members into research teams as co-researchers, advisors and/or consultants; melanoma consumer collaborators should **not** be named as Initiating or Partnering PIs. Examples for implementing collaborative research approaches are listed below, but each research team may pursue other options as appropriate for the proposed research. The research team may:

- Include at least one melanoma consumer who will provide advice and consultation throughout the planning, implementation and results dissemination of the research project. The consumer(s) should be able to speak to the needs of the melanoma consumer community, not just speak to their own personal experiences.
- Establish partnerships with at least one community-supporting organization that provides advice and consultation throughout the planning, implementation and results dissemination of the research project. Community-supporting organizations may include advocacy groups or other formal organizational stakeholders that can speak to the needs of the melanoma consumer community.
- Assemble a melanoma consumer community advisory board. The advisory board may include melanoma consumers, a coalition of community-supporting organizations or any combination thereof that provides advice and consultation throughout the planning, implementation and results dissemination of the research project.

Additional information on collaborative research approaches can be found in:

- Cancer Research UK. [Patient involvement toolkit for researchers.](#)

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- Patricia A. Spears, “Patient Engagement in Cancer Research From the Patient’s Perspective,” *Future Oncology* 17, no. 28 (2021): 3717–28. doi: [10.2217/fon-2020-1198](https://doi.org/10.2217/fon-2020-1198). Epub 2021 Jul 2. PMID: [34213358](https://pubmed.ncbi.nlm.nih.gov/34213358/).
- Ann Tivey et al., “Patient Engagement in Melanoma Research: From Bench to Bedside,” *Future Oncology* 17, no. 28 (2021): 3705–16. doi: [10.2217/fon-2020-1165](https://doi.org/10.2217/fon-2020-1165). Epub 2021 Jul 2. PMID: [34213356](https://pubmed.ncbi.nlm.nih.gov/34213356/).
- Jeannine M. Salamone, et al., “Promoting Scientist-Advocate Collaborations in Cancer Research: Why and How,” *Cancer Research* 78, no. 20 (2018): 5723–28. doi: [10.1158/0008-5472.CAN-18-1600](https://doi.org/10.1158/0008-5472.CAN-18-1600).
- Food and Drug Administration. [Center for Drug Evaluation and Research \(CDER\) Patient-Focused Drug Development](#).

3.2.2. Other Important Considerations for the SRA

Relevance to Military Health: Advancing knowledge in melanoma research, patient care and/or treatment options in the Military Health System is critical. Therefore, the MRP seeks to support research that is relevant to the health care needs of Service Members, Veterans and/or other their Families. The MRP encourages investigators to consider the following examples of how a project may demonstrate relevance to military health:

- Use of military or Veteran populations, biospecimens, data, databases or programs in the proposed research.
- Applications from investigators within the DOW and applications involving multidisciplinary collaborations among academia, industry, DOW, U.S. Department of Veterans Affairs (VA) and other federal government agencies are highly encouraged. These relationships can leverage knowledge, infrastructure and access to unique clinical populations that the collaborators bring to the research effort, ultimately advancing research that is of significance to Service Members, Veterans and/or their Families.
- Explanation of how the project addresses an aspect of melanoma that has relevance or is unique to Service Members, Veterans and/or their Families.

If the proposed research involves access to active-duty military and/or VA patient populations and/or DOW or VA resources or databases, the application must describe the access at the time of submission and include a plan for maintaining access as needed throughout the proposed research. Refer to the [Full Application Submission Components](#), for detailed information. Refer to the GAI, [Appendix 4](#), for additional information.

A list of websites that may be useful in identifying additional information about ongoing DOW and VA areas of research interest or potential opportunities for collaboration can be found in [Appendix 10](#) of the GAI.

Preclinical Research: All projects should adhere to a core set of standards for rigorous study design and reporting to maximize the reproducibility and translational potential of clinical and preclinical research, such as those described in the [STROBE](#), [CONSORT](#), [SPIRIT](#) and [ARRIVE guidelines 2.0](#).

For Research Involving Animals: In accordance with the National Defense Authorization Act for Fiscal Year 2026, Section 732, CDMRP does not support the conduct of painful research ([U.S. Department of Agriculture pain category D or E](#)) involving domestic cats or dogs, except for studies relating to military or service animals.

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The MRP acknowledges that domestic dogs can spontaneously develop mucosal melanoma. FY26 applications proposing mucosal melanoma studies involving pets that are voluntarily enrolled in studies at the owner's discretion may be considered (e.g., a pet owner enrolling their domestic dog in a clinical trial administered in a veterinary hospital setting). Such studies, if recommended for funding, must obtain a waiver of National Defense Authorization Act for Fiscal Year 2026, Section 732 before initiating. Receipt of such a waiver is not guaranteed.

For Research Involving Human Data, Human Anatomical Substances, Human Subjects or Human Cadavers:

[Clinical trials](#) **are allowed** within this funding opportunity.

For the purposes of this funding opportunity, research that meets the definition of a clinical trial is distinct from [clinical research](#).

For more information, a [Human Subject Research Resource](#) is available on the CDMRP website.

Metastatic Cancer Task Force: A congressionally mandated Metastatic Cancer Task Force was formed with the purpose of identifying ways to help accelerate clinical and translational research aimed at extending the lives of advanced stage and recurrent patients. As a member of the Metastatic Cancer Task Force, CDMRP encourages applicants to review the [recommendations](#) and submit research ideas to address these recommendations provided they are within the limitations of this funding opportunity and fit within the FY26 MRP [strategic priorities](#).

3.3. Funding Instrument

The funding instrument for awards made under the program announcement will be grants (31 USC 6304).

3.4. Funding Details

[Period of Performance:](#) The maximum period of performance is **3** years.

[Cost Cap:](#) The application's [total costs](#) budgeted for the entire period of performance should not exceed **\$1.02M**. If indirect cost rates have been negotiated, indirect costs are to be budgeted in accordance with the organization's negotiated rate. Collaborating organizations should budget associated indirect costs in accordance with each organization's negotiated rate.

All direct and indirect costs of any subaward or contract must be included in the direct costs of the primary award.

The applicant may request the entire maximum funding amount for a project that may have a period of performance less than the maximum **3** years.

The appropriateness of the budget for the proposed research will be assessed during peer review.

Direct Cost Restrictions: For this award mechanism, direct costs:

May be requested for (not all-inclusive):

- Travel in support of multi-institutional collaborations.
- Costs for one investigator to travel to one scientific/technical meeting per year. The intent of travel to scientific/technical meetings should be to present project information or disseminate project results from the MRP SRA.

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- Costs associated with [melanoma consumer collaboration](#) (e.g., consultant costs, equitable participation training, capacity-building activities).
- Research subject compensation and reimbursement for trial-related out-of-pocket costs (e.g., travel, lodging, parking, costs associated with caregiving, and resources/equipment to enable participation).

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4. Application Contents and Format

4.1. Application Overview

Application submission is a two-step process requiring both a **pre-application** submitted via the Electronic Biomedical Research Application Portal ([eBRAP](#)) and a **full application** submitted through eBRAP or Grants.gov. Depending on the submission portal, certain aspects of the application will differ.

Intramural DOW organizations submitting a full application should follow instructions for submission through eBRAP.



Extramural organizations submitting a full application must follow instructions for submission through Grants.gov.



4.2. Pre-Application Components

Pre-application submissions must include the following components.

Letter of Intent (LOI) (one-page limit): Provide a brief description of the research to be conducted. Identify the [melanoma consumer collaborator\(s\)](#) that will serve as an advisor/consultant for the proposed research efforts (**required**).

4.3. Full Application Components

Each application submission must include the completed full application package for this program announcement. See [Appendix 1](#) for a checklist of the full application components.

(a) SF424 Research & Related Application for Federal Assistance Form (*Grants.gov submissions only*):



IMPORTANT: When completing the SF424 R&R, enter the **eBRAP log number** assigned during pre-application submission into **Block 4a – Federal Identifier**.

(b) Attachments:

Each attachment of the full application components must be uploaded as an individual file in the format specified and in accordance with the [formatting guidelines](#) in the GAI.

- **Attachment 1: Project Narrative (10-page limit): Upload as “ProjectNarrative.pdf”.**



Describe the proposed project in detail using the outline below.

- **Background:** Present the rationale to support the proposed research and its feasibility, as established through the demonstration of logical reasoning and a critical review and analysis of published literature; include relevant literature citations. As appropriate for the proposed research, provide sufficient preliminary data to support the feasibility of work proposed. An application proposing a clinical trial **must** include sufficient preliminary data to justify the conduct of the trial. Any unpublished, preliminary data provided should originate from the laboratory of the PI or a member of the research team.
- **Hypothesis/Objective:** State the hypothesis to be tested or the objective to be reached.

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- **Specific Aims:** State the specific aims of the study. **Only present aims that this award would fund.**
- **Research Strategy and Feasibility:** Describe the experimental design, methodology and analyses, including appropriate controls, in sufficient detail for evaluation of their appropriateness and feasibility. Describe how the studies are designed to achieve reproducible and rigorous results that support successful completion of the project aims. Address potential problems and pitfalls and present alternative methods and/or approaches.
 - **Statistical considerations for applications that DO NOT propose a clinical trial:** Clearly describe the statistical plan and the rationale for the statistical methodology. Describe an appropriate power analysis, how it supports the sample size and how it adequately represents an assessment of the population or subpopulation proposed. If a power analysis was not used to determine the proposed sample size, justify why a power analysis is not essential to the statistical evaluation. Ensure sufficient information is provided to allow thorough evaluation of all statistical calculations and/or the power of the proposed studies during review of the application. If there are sample size limitations (budget limitations, availability of specimens, etc.) explain how analysis of the proposed sample size(s) will yield meaningful information.
 - **Statistical considerations for applications that DO propose a clinical trial:** Describe the statistical model and data analysis plan with respect to the clinical trial objectives. Include a complete power analysis to demonstrate that the proposed clinical trial's anticipated sample size is appropriate to meet the objectives of the study. Describe all clinical and statistical justifications and assumptions that support the sample size calculations. Explain any anticipated subgroup analyses and demonstrate that such analyses are appropriately powered. Ensure sufficient information is provided to allow thorough evaluation of all statistical calculations during review of the application.
 - A separate [Sex as a Biological Variable \(SABV\) Strategy](#) is required for all applications as part of Attachment 2.
 - If cell lines are to be used, justify why the proposed cell line(s) were chosen and clearly articulate the source(s) of the proposed cell line(s).
 - If animal studies are proposed, including the use of patient-derived xenografts (PDXs) models, justify why the proposed animal model was chosen and clearly articulate the source of the model(s). Describe how the animal studies are conducted in accordance with the appropriate [guidelines](#) to ensure relevant aspects of rigorous and reproducible research are adequately planned for and, ultimately, reported.
 - If human data sets, human anatomical substances (blood, tumor tissue, etc.), and/or human participants will be used, provide evidence supporting the availability of and access to the proposed specimens/populations required for the study. Include a detailed plan for the acquisition of samples or the recruitment of participants, and for acquiring any additional research resources necessary for conducting the proposed research project. For applications proposing a clinical trial, provide this information within [Attachment 8: Clinical Trial Strategy Statement](#) rather than the Project Narrative.

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For projects that propose using human data sets and/or specimens from biobank(s), biorepository(s) and/or ongoing or completed clinical trial(s), and if the manager or lead investigator is not the named PI or key personnel on the application, applicants should provide a letter(s) of collaboration within [Attachment 2](#) from the manager or lead investigator for the source that details the applicant's access to the data sets/specimens and confirms the manager/lead investigator's commitment to provide the data sets/specimens.

- For applications that propose ***clinical research and/or a clinical trial***, describe the strategy for the inclusion of women and minorities appropriate to the objectives of the study, including a description of the composition of the proposed study population in terms of sex, racial and ethnic group, and an accompanying rationale for the selection of specimens/participants. Studies utilizing human biospecimens or datasets that cannot be linked to a specific individual, ethnicity or race (typically classified as exempt from Institutional Review Board [IRB] review) are exempt from this requirement. See [Attachment 2](#) for instructions regarding the Inclusion Enrollment Report that is required with all applications that propose clinical research/and or a clinical trial.
 - For applications that propose using funds from this award for prospective human participant enrollment provide a mitigation plan for the estimated attrition of subjects. For applications proposing a clinical trial, this information should be provided within [Attachment 8: Clinical Trial Strategy Statement](#) rather than the Project Narrative.
 - If the proposed research involves access to military and/or VA patient populations and/or DOW or VA resources or databases, describe the access at the time of submission and include a plan for maintaining access as needed throughout the proposed research. Also include a plan for obtaining any required data sharing, memorandum of understanding or other agreements required to access and publish data. Refer to the General Application Instructions, [Appendix 4](#), for additional considerations.
- **Clinical Trial Information (if applicable): *For applications that propose using funds from this award to conduct a clinical trial*** provide the following information within the Project Narrative:
- Identify the intervention. Briefly outline the primary – and secondary, if applicable – endpoints of the trial and any relevant biomarkers. A thorough description of the endpoints will be requested in [Attachment 8: Clinical Trial Strategy Statement](#).
 - Describe the type of study to be performed (e.g., treatment, prevention, diagnostic), the study phase or class (if applicable), and the study model (e.g., single group, parallel, crossover). Explain how the chosen trial design is best suited to answer the proposed research question.

NOTE: Details regarding the Clinical Trial Strategy must be described in [Attachment 8](#). Do not duplicate information from the Clinical Trial Strategy in the Project Narrative. The Project Narrative is not the formal clinical trial protocol. If recommended for funding, the clinical trial protocol will be requested during award negotiations.

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- **Attachment 2: Supporting Documentation: Combine and upload as a single file named “Support.pdf”.**



There are no page limits for these components unless otherwise noted. Include only components described below; inclusion of items not requested or viewed as an extension of the Project Narrative will result in the removal of those items or may result in administrative withdrawal of the application.

- **References Cited:** List the references cited in the Project Narrative using a standard reference format (include URLs, if available).
- **List of Abbreviations, Acronyms and Symbols:** Provide a list of abbreviations, acronyms and symbols.
- **Facilities, Existing Equipment and Other Resources:** Describe the facilities and equipment available for performance of the proposed project; include any additional facilities or equipment proposed for acquisition at no cost to the award. Indicate whether government-furnished facilities or equipment are proposed for use. If so, reference the original or present government award under which the facilities or equipment items are now accountable. There is not a standardized form for this information.
- **Publications and/or Patents:** Include a list of relevant publication URLs and/or patent abstracts. If articles are not publicly available, then copies of up to five published manuscripts may be included in Attachment 2. Extra items will not be reviewed.
- **Letters of Support (two-page limit per letter is recommended):** Provide individual letters signed by collaborating individuals and/or organizational officials demonstrating that the PI has the support and resources necessary for the proposed work. Letters from the PI’s Department Chair, or appropriate organization official, should also confirm that the PI meets [eligibility criteria](#). If applicable, provide a letter of support, signed by the lowest-ranking person with approval authority, confirming participation of intramural DOW collaborator(s) and/or access to military populations, databases or DOW resources. If applicable, provide a letter of support signed by the VA Facility Director(s), or an individual designated by the VA Facility Director(s), confirming access to VA patients, resources and/or VA research space.
- **SABV Strategy (two-page limit is recommended):** Describe the strategy for how sex will be considered as a biological variable. This strategy should include a brief discussion of what is currently known regarding sex differences in the applicable research area. Clearly articulate how sex as a biological variable will be factored into the data analysis plan and how data will be collected and disaggregated by sex. If needed, provide a strong rationale for proposing a single-sex study, based on justification from scientific literature, preliminary data or other relevant considerations. Refer to the [CDMRP Directive on Sex as a Biological Variable in Research](#) for additional information.
- **Research Sharing Plan:** Describe the type of data or research resources (e.g., bio-specimen, analysis tool/software, training material) to be made publicly available as a result of the proposed work. Describe the mechanism (e.g., direct sharing, repository, mixed mode) by which data and resources generated during the period of performance will be shared with the research community and other affected communities, including clinical research participants. Include the name of the repository(ies) where scientific data and resources arising from the proposed study

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will be archived, if applicable. Identify and provide the rationale for any data or resources that will not be shared (e.g. for intellectual property, feasibility, cost or other considerations). The plan should also protect participant privacy, confidential and proprietary data, and performer/third-party intellectual property. Provide a milestone plan for disseminating data/results including when data and resources will be made available to other users. In cases where the study participant could potentially derive medical or other benefit from the information, explain whether the results of screening and/or study participation will be shared with the participant or their primary care provider, including results from any screening or diagnostic tests performed as part of the study.

Do not submit a copy of the National Institutes of Health (NIH) Data Management and Sharing Plan or duplicate the Data Management Plan which will be requested only after a recommendation for funding is made.

Refer to the [CDMRP Directive on Sharing Data and Research Resources](#) for more information about the CDMRP's expectations for making data and research resources publicly available.

- **Inclusion Enrollment Report (only required if [clinical research](#) and/or a [clinical trial is proposed](#)):** Provide an anticipated enrollment table(s) for the inclusion of women and minorities using the "[Public Health Service \(PHS\) Inclusion Enrollment Report](#)", a three-page fillable PDF form, that can be downloaded from eBRAP. The enrollment table(s) should be appropriate to the objectives of the study with the proposed enrollment distributed on the basis of sex, race and ethnicity. Studies utilizing human biospecimens or datasets that cannot be linked to a specific individual, ethnicity or race (typically classified as exempt from IRB review) are exempt from this requirement.

- **Attachment 3: Technical Abstract (one-page limit): Upload as "TechAbs.pdf".** 

Write the technical abstract using the outline below. Clarity and completeness within the space limits are highly important.

- **Background:** Present the rationale behind the proposed research project.
- **Hypothesis/Objective(s):** State the hypothesis to be tested or objective(s) to be reached.
- **Specific Aims:** State the specific aims of the study.
- **Study Design:** Describe the study design, including appropriate controls.
- **Impact:** Summarize how the outcomes of the proposed research will improve the health and well-being of melanoma survivors, their families and/or care partners.


- **Attachment 4: Lay Abstract (one-page limit): Upload as "LayAbs.pdf".** 

The lay abstract should address the points outlined below ***in a manner that is readily understood by readers without a background in science or medicine.*** Avoid overuse of scientific jargon, acronyms and abbreviations. ***Do not duplicate the technical abstract.***

- Summarize the objectives and rationale for the proposed research.

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- Summarize the melanoma consumer collaboration plan, including the name(s) of the melanoma consumer(s) and/or melanoma community-serving organization(s) involved in the collaboration.
- Summarize the applicability of the research to melanoma survivors, their families and/or care partners by considering the following points:
 - Who will the proposed research help and how will it help them?
 - What are the potential applications, benefits, and risks?
 - How will the proposed research outcomes improve the health and well-being Service Members, Veterans, their Families and the American public?
- **Attachment 5: Statement of Work (three-page limit): Upload as “SOW.pdf”.** 
Refer to eBRAP for the [Suggested SOW Format](#).

For guidance on preparing the SOW, refer to either the [Example: Assembling a Clinical Research and/or Clinical Trial Statement of Work](#) or [Example: Assembling a Generic Statement of Work](#), whichever is most appropriate for the proposed effort. Include milestones for data or research resource(s) sharing.

The SOW should contain tasks outlining the [melanoma consumer collaborator’s](#) contributions to the proposed research’s implementation, evaluation, and results dissemination.
- **Attachment 6: Impact Statement (one-page limit): Upload as “Impact.pdf”.** *The impact statement should be written using language that will be readily understood by readers without a background in science or medicine.* Describe a practical vision for how the short- and long-term outcomes of the proposed research will improve the health and well-being of melanoma survivors, their families and/or care partners. Describe the relevance of the proposed research to the health and well-being of Service Members, Veterans, their Families and all people affected by melanoma. If applicable, describe how the anticipated outcomes of the proposed study will make an impact in understanding health differences between sexes. For applications that propose a clinical trial, describe how the intervention addresses the needs of melanoma survivors, family members and/or care partners and how the intervention being tested improves upon currently available interventions or standards of care. Explain how the outcome(s) of the clinical trial will ultimately translate to the intended population(s). Describe any potential challenges that might limit the impact of the proposed clinical trial, including barriers to implementation or acceptance of the intervention by users.
- **Attachment 7: Melanoma Consumer Collaboration Plan: Combine multiple documents, including letters of collaboration, into one PDF and upload as “Consumer.pdf”.**
 - **Melanoma Consumer Collaboration Statement (two-page limit is recommended):** The Melanoma Consumer Collaboration statement should address the following:
 - Describe the collaborative research approach (collaborating with at least one melanoma consumer, partnering with a melanoma community-supporting organization, etc.), including a justification for the approach.
 - Indicate the input from the melanoma consumer partner that has already been and/or will be captured and how this input has been and will be meaningfully

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- incorporated into the needs assessment, planning, design, execution, analysis and results dissemination of the research.
- Describe any training that will be provided to either scientific researchers and/or melanoma consumer community members on collaborative research approaches, decision-making and equitable participation.
- Describe the evaluation measures that will be used to assess the effectiveness of the chosen collaborative research approach.
- **Letter(s) of Melanoma Consumer Collaboration (two-page limit per letter is recommended):** Provide a letter signed by each melanoma consumer collaborator and/or community-supporting organization confirming their role and commitment to participate on the research team throughout the period of performance. If engaging with a community-supporting organization, both the organization’s point of contact leading the collaboration and the organization’s leadership endorsing the collaboration should sign the letter of commitment. The letter should include the qualifications and background of the melanoma consumer collaborator(s) and describe the relevance of those qualifications to the proposed research.
- **Attachment 8: Clinical Trial Strategy Statement (if applicable) (no page limit): Upload as “Clinical.pdf”.** This attachment is only required for projects that propose using funds from this award to conduct a clinical trial. If a Clinical Trial Strategy Statement is included with an application that does NOT propose a clinical trial, then the Clinical Trial Strategy Statement will be removed prior to the application being reviewed. Do not duplicate information from the Project Narrative in the Clinical Trial Strategy Statement.
 - Describe the composition of the clinical trial team in enough detail to determine whether the team includes relevant subject matter expertise to accomplish the proposed work. Include any external consultants or advisors who will provide critical guidance and input to the clinical trial team (e.g., statistician, regulatory expert, commercialization consultant, clinical ethicist, patient advocate). Include study coordinator(s). Describe how the levels of effort for each individual are appropriate to successfully support the proposed clinical trial.
 - Demonstrate the availability of the intervention. Indicate who holds the intellectual property rights to the intervention, if applicable, and how the PI has obtained access to those rights for conduct of the clinical trial. As applicable, provide appropriate letters of commitment in [Attachment 2: Supporting Documentation](#) demonstrating the clinical trial team’s access to the intervention(s) for the duration of the clinical trial.
 - Describe the study population and the inclusion and exclusion criteria that will be used to meet the needs of the proposed clinical trial. Describe the recruitment process in detail, including methods employed to retain participants within the study. Discuss past efforts in recruiting and retaining study participants for previous clinical trials (if applicable). Indicate whether the study team has considered barriers to clinical trial participation and, if applicable, how the team aims to mitigate or overcome these barriers.
 - Describe the proposed clinical trial in sufficient detail to evaluate its appropriateness and feasibility, relating to both the scientific success of the study and setting reasonable expectations for what study participants will experience. Outline the proposed clinical trial methodology and study variables in sufficient detail to demonstrate a clear course of action and justification. Define each arm/study group

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- of the proposed trial, if applicable, and describe how group assignment will occur. Provide a detailed description of the primary and any secondary or interim endpoints/outcome measures, explain why they were chosen and describe how and when they will be measured. Outline what measures will be used to minimize bias, including blinding and randomization procedures. Describe any other measures taken to reduce bias. Include a description of controls, as appropriate. Outline the timing and procedures planned during the follow-up period. Provide sufficient detail in chronological order for a person uninvolved in the study to understand what the study participant will experience.
- If the proposed clinical trial was initiated using other funding prior to this application, explain the history and background of the clinical trial and declare the source of prior funding. Specifically, ***clearly articulate the portions of the clinical trial supported by this award.***
 - Provide detailed plans for initiating the clinical trial within the first year of the award period of performance.
 - Describe how data will be reported and how it will be assured that the documentation will support a regulatory filing with the U.S. Food and Drug Administration (FDA), if applicable.
 - **Regulatory Documentation:** For the purposes of this funding opportunity, Regulatory Agency refers to the FDA or any relevant international Regulatory Agency unless otherwise noted.
 - ***For products/interventions that DO NOT require regulation by a Regulatory Agency:*** Provide evidence that the clinical trial does not require regulation by a Regulatory Agency. Submissions providing “not applicable,” “none,” or similar responses do not satisfy this request. No further regulatory documentation is required.
 - ***For products that DO require regulation by a Regulatory Agency:*** If the product is not currently FDA-approved, -licensed or -cleared, and requires an Investigational New Drug/Investigational Device Exemption (IND/IDE) or equivalent, provide detailed plans for an FDA IND/IDE application submission within 60 days of the award. The IND or IDE should be specific for the investigational product (i.e., not a derivative or alternate version of the product) and indication tested in the proposed study.
 - If available, provide documentation that:
 - ❖ Indicates the date of Regulatory Agency submission, application number and sponsor for any existing FDA applications in place.
 - ❖ Supports the feasibility of acquiring an active IND or IDE (and/or international equivalent) for the product.
 - ❖ Shows the communication from the FDA indicating the IND or IDE application is active/safe to proceed.
 - **Attachment 9: Questionnaires and Other Data Collection Instruments, (if applicable) (no page limit): Upload as “Questionnaire.pdf”.** The Questionnaires and Other Data Collection Instruments attachment should include a copy of the most recent version of questionnaires, data collection forms, rating scales, interview guides or other instruments. For each instrument, describe how the information collected is related to the objectives of the study. Describe how and when the instrument(s) will be

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administered. Describe how the instrument(s) will be adapted to the subject population, if applicable.

- **Attachment 10: Post-Award Transition Plan (three-page limit): Upload as “Transition.pdf”.** PIs are encouraged to work with their organization(s)’s Technology Transfer Office (or equivalent) to develop the transition plan. The research team is also encouraged to explore developing relationships with industry and/or other funding agencies to facilitate moving the anticipated research outcome(s) and/or product(s) into the next phase of development. The post-award transition plan should include the following components:
 - Define the project’s anticipated research outcome(s) and/or product(s) (e.g., finding, methodology, intervention, device).
 - Describe the next logical steps to be taken **by the research team** upon successful completion of the project to advance the anticipated research outcome(s)/product(s) to the next stage of development (e.g., next stage preclinical/clinical research, implementation, translational research, clinical trial). Include a description of collaborations and other resources that are in place or would be established during the period of performance to execute the next logical steps (e.g., clinical partners, commercial partners, manufacturing partners, clinical practice guideline development/execution committees, training providers/resources).
 - Describe/discuss the methods and strategies necessary for the research outcome/product to impact survivorship care and/or outcomes, even if those are long-term goals; include a timeline with defined milestones. Include details of the funding strategy necessary to transition to the next level of investigation, development and/or implementation. This may include commercial sponsorship, venture capital, federal or nonfederal funding opportunities, etc. Discuss the opportunities available and potential barriers that would impact the progress of commercializing and/or translating the research outcome(s)/product(s) into public utility and/or clinical practice.
 - If applicable, discuss ownership rights/access to the intellectual property necessary for the development and/or commercialization of products or technologies supported with this award, including a plan for resolving intellectual and material property issues among participating organizations. If the intellectual property rights are not owned by the performer(s), describe the planned next steps necessary to make the product available to the melanoma community.
- **Attachment 11: Representations (*Grants.gov submissions only*): Upload as “RequiredReps.pdf”.** All extramural applicants must complete and submit the [Required Representations](#) document available on eBRAP. 
- **Attachment 12: Suggested Intragovernmental/Intramural Budget Form (*if applicable*): Upload as “IGBudget.pdf”.** If an [intramural DOW organization](#) will be a collaborator in the performance of the project, complete a separate budget for that organization using the [Suggested Intragovernmental/Intramural Budget](#) form available on eBRAP. 

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(c) Additional Application Materials:

The following are additional forms for application submission. Follow the instructions specific to the submission portal, as found within the GAI.



Grants.gov



eBRAP.org

i. Research & Related Senior/Key Person Profile (Expanded)

- **Biographical Sketch**
- **Current/Pending Support**

Intragovernmental applicants must include their internally supported research and development programs.

ii. Research & Related Budget

iii. Project/Performance Site Location(s)

iv. Research & Related Subaward Budget Attachment(s) *(if applicable, Grants.gov submissions only)*

4.4. Other Application Elements

If recommended for funding, a data management plan compliant with Section 3.c, Enclosure 3, [DoD Instructions 3200.12](#) will be requested.



The government reserves the right to request a revised budget, budget justification and/or additional information for applications recommended for funding.

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5. Submission Requirements

5.1. Location of Application Package

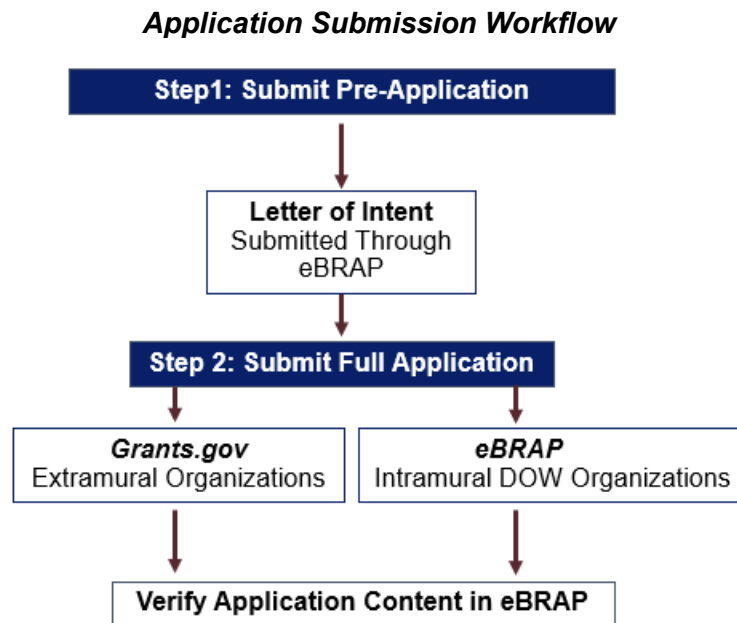
Download the application package components for HT942526MRPSRA from [Grants.gov](#) or [eBRAP](#), depending on which submission portal will be used.

5.2. Unique Entity Identifier and System for Award Management

The applicant organization must be registered as an entity in the System for Award Management (SAM), [SAM.gov](#), and receive confirmation of an “Active” status before submitting an application through Grants.gov. Organizations must include the unique entity identifier (UEI) generated by the SAM in applications to this funding opportunity and maintain an active registration in the SAM at all times during which it has an active Federal award or an application under consideration. i

5.3. Submission Instructions

The CDMRP uses two portal systems to accept pre- and full application submissions. The workflow below shows which portal system to use for pre- and full application submissions, respectively.



5.3.1. Pre-Application Submission

All pre-application components must be submitted by the PI through [eBRAP](#). i

During the pre-application process, eBRAP assigns each submission a unique log number. This unique log number is required during [the full application submission process](#). The eBRAP log number, application title and all information for the PI, Business Official(s),

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performing organization and contracting organization must be consistent throughout the entire pre-application and full application submission process. Inconsistencies may delay application processing and limit or negate the ability to view, modify and verify the application in eBRAP. Contact the [eBRAP Help Desk](#) if any changes need to be made.

When starting the pre-application, PIs should select a Mechanism Option appropriate to their pre-application:

| Application Includes: | Select Mechanism Option: |
|-----------------------------------|--|
| DOES NOT include a clinical trial | Survivorship Research Award |
| DOES include a clinical trial | Survivorship Research Award – Clinical Trial Option |


NOTE: The PI should name the melanoma consumer collaborator(s) during the pre-application submission. For administrative purposes, select “Consumer” when assigning the melanoma consumer collaborator(s) roles in eBRAP under “Collaborators and Key Personnel”.

5.3.2. Full Application Submission

Grants.gov Submissions: Full applications from extramural organizations *must* be submitted through the Grants.gov Workspace. 

eBRAP Submissions: Only [intramural DOW organizations](#) may submit full applications through eBRAP. 

5.3.3. Applicant Verification of Full Application Submission in eBRAP

Independent of the submission portal, once the full application is submitted, it is transmitted to and processed in eBRAP; the transmission to eBRAP may take up to 48 hours. At this stage, the PI and organizational representatives will receive an email from eBRAP instructing them to log in to eBRAP to review, modify and verify the full application submission. 
The Project Narrative and Research & Related Budget Form cannot be changed after the application submission deadline. Other application components, including subaward budget(s) and subaward budget justification(s), may be changed until the [application verification period](#) ends. The full application cannot be modified once the application verification period ends.

5.4. Submission Dates and Times

The pre-application and full application submission process should be started early to avoid missing deadlines. Regardless of submission portal used, all pre- and full application components must be submitted by the deadlines stipulated in this program announcement. There are no grace periods for deadlines; failure to meet submission deadlines will result in application rejection. ***The DHACA cannot make allowances/exceptions for submission problems encountered by the applicant.***

Submission dates and times are specified in [Section 1, Basic Information](#).

5.5. Intergovernmental Review

Not applicable for this funding opportunity.

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6. Application Review Information

6.1. Application Compliance Review

Submitting applications that propose essentially the same research project to different funding opportunities within the same program and fiscal year is prohibited and will result in administrative withdrawal of the duplicative application(s).

While it is allowable to propose similar research projects to different programs within the CDMRP or to other organizations, duplication of funding or accepting funding from more than one source for the same research is prohibited. See the [CDMRP's Directive on Research Duplication](#).

Including classified research data within the application and/or proposing research that may produce classified outcomes or outcomes deemed sensitive to national security concerns, may result in application withdrawal.



Members of the FY26 MRP Programmatic Panel must not be involved in any pre-application or full application including, but not limited to, concept design, application development, budget preparation and the development of any supporting documentation, including personal letters of support/recommendation for the research and/or PI. Programmatic panel members **may** provide [letters](#) to confirm [PI eligibility](#) and access to laboratory space, equipment and other resources necessary for the project if that is part of their regular roles and responsibilities (e.g., as Department Chair). ***A list of the [FY26 MRP Programmatic Panel members](#) can be found on the CDMRP website.***

Additional restrictions and associated administrative responses are outlined in [Section 9.2, Administrative Actions](#).

6.2. Review Criteria

6.2.1. Pre-Application Screening Criteria

Pre-applications submitted to this funding opportunity are used for program planning purposes only (e.g., reviewer recruitment) and will not be screened.

6.2.2. Peer Review Criteria

To determine technical merit, all applications will be evaluated individually according to the following **scored criteria**, which are of equal importance:

- **Research Strategy and Feasibility**

- To what extent the scientific rationale supports the project and its feasibility, as demonstrated by logical reasoning, a critical review and analysis of the literature, and, as appropriate for the proposed research project, sufficient preliminary data are provided. If a clinical trial is proposed, whether the provided preliminary data justify the conduct of the trial.
- To what extent the experimental design, methodology and analyses are described in sufficient detail and are designed to achieve reproducible and rigorous results to support successful completion of the specific aims.

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- To what extent the application acknowledges potential problem areas and pitfalls and presents alternative methods and/or approaches.
 - To what extent the scope of the proposed research is appropriate for the allowed budget and period of performance limits.
 - To what extent the statistical plan is appropriate for the proposed research, and the application provides sufficient information to allow thorough evaluation of all statistical calculations. If applicable, whether the power analysis for the proposed study adequately represents an assessment of the population or subpopulation proposed. If a clinical trial is proposed, to what extent the statistical model and data analysis plan with respect to the trial objectives are well-described and appropriate, and sufficient justification is provided for the proposed number of study participants.
 - Whether the strategy for considering sex as a biological variable is appropriate to the objectives of the study or whether the justification for a single sex study is sufficiently strong.
 - If applicable, whether the use of the proposed cell lines is appropriately justified.
 - If applicable, to what extent the animal studies are designed to achieve the research objectives, to include the use of appropriate models.
 - If applicable, to what extent the application demonstrates the availability of human data sets, human anatomical substances and/or human participants, including a detailed plan for the acquisition of samples/resources and/or recruitment of human participants necessary for conducting the proposed research.
 - If applicable, whether the strategies for the inclusion of women and minorities are appropriate to the objectives of the clinical research study and/or proposed clinical trial, including a description of the composition of the proposed study and a rationale for the selection of participants. Whether a completed Inclusion Enrollment Report providing anticipated enrollment table(s) for the inclusion of women and minorities is included with the application.
 - If applicable, to what extent the application describes access to the study population, recruitment plans and inclusion/exclusion criteria for any projects that propose using funds from this award for prospective human participant enrollment. Whether an appropriate mitigation plan is provided for the estimated attrition of subjects.
 - How well studies are designed to achieve reproducible and rigorous results, including the choice of model and the endpoints/outcomes to be measured.
- **Impact**
 - ***Assuming the objectives/aims of the proposed research are realized, to what degree:***
 - A practical vision for how the short- and long-term outcomes of the proposed research will improve the health and well-being of melanoma survivors, their families and/or care partners is described.
 - The relevance of the proposed research to the health and well-being of Service Members, Veterans, their Families and all people affected by melanoma is described.
 - If applicable, to what extent the anticipated outcomes of the proposed research will make an impact in understanding health differences between sexes.
 - If a clinical trial is proposed:

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- The application describes how the intervention addresses the needs of melanoma survivors, family members and/or care partners and how the intervention being tested improves upon currently available interventions and/or standards of care.
 - The application explains how the outcome(s) of the trial will ultimately be translated to the intended population(s).
 - The application describes any potential challenges that might limit the impact of the proposed clinical trial, including barriers to implementation or acceptance of the intervention by users.
- **PI and Key Personnel**
 - To what extent the levels of effort of the PI and key personnel are appropriate for the successful conduct of the proposed research.
 - Based on the biographical sketches, to what extent the background of the PI and key personnel are appropriate to complete the proposed research.
 - If a clinical trial is proposed, to what extent the clinical trial team includes relevant subject matter expertise to accomplish the proposed clinical trial, including any external consultants or advisors who will provide critical guidance and input to the clinical trial team. Whether the levels of effort for each individual are appropriate to successfully support the proposed clinical trial.
 - **Melanoma Consumer Collaboration Plan**

For the purposes of the SRA Melanoma Consumer Collaboration, a ***“melanoma consumer” is defined as a melanoma survivor (active or post-treatment), family member and/or care partner who can provide lived experience expertise to the research team.***

 - How well a collaborative research approach with the melanoma consumer community is described.
 - Whether at least one melanoma consumer and/or a melanoma consumer community-supporting organization is named.
 - How well the application describes the input from the melanoma consumer community partner(s) that has already been and/or will be captured.
 - How well the application describes how the melanoma consumer community input has been and/or will be meaningfully integrated and incorporated into the needs assessment, planning, design, execution, analysis and dissemination of the research. Whether the SOW contains tasks outlining the collaborator’s contributions.
 - Whether at least one letter of support from the melanoma consumer community collaborator(s) is/are provided and to what extent the letter(s) includes the qualifications and background of the melanoma consumer collaborator(s) and describes the relevance of those qualifications to the proposed research.
 - How well the application describes the process measures that will be used to assess the effectiveness of the chosen collaborative research approach.
 - **Post-Award Transition Plan**
 - To what extent the post-award transition plan outlines the project’s anticipated research outcome(s) and/or product(s).

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- To what extent the plan describes the next logical steps to be taken by the research team to advance the anticipated research outcome(s)/product(s) to the next stage of development.
- To what extent the plan describes collaborations and other resources that are in place or will be established during the period of performance to execute the proposed next logical steps.
- To what extent the plan describes the methods and strategies necessary for the research outcome/product to impact survivorship care and/or outcomes and whether the plan provides a timeline with defined milestones.
- To what extent the plan describes the funding strategy necessary to transition the outcomes of the overall program to the next level of investigation, development and/or implementation.
- To what extent the plan discusses the opportunities available and potential barriers that would impact the progress of commercializing and/or translating the research outcome(s)/products(s) into clinical practice/public utility.
- If applicable, to what extent the applicant discusses ownership rights and/or access to the intellectual property necessary for the development and/or commercialization of products or technologies supported under this award.
- **Clinical Trial Strategy (*Clinical Trial Option only*)**
 - To what extent the intervention is clearly identified, and appropriate endpoints are described.
 - To what extent the application demonstrates availability of the intervention and indicates who holds the intellectual property rights to the intervention.
 - To what extent the clinical trial design is best suited to answer the proposed research question.
 - To what extent the study population and inclusion/exclusion criteria are well-described. To what extent the recruitment process and barriers to participation are described in detail.
 - To what extent the proposed clinical trial methodology and study variables are outlined in sufficient detail to demonstrate a clear course of action and justification. Whether sufficient detail is provided in chronological order for a person uninvolved in the study to understand what the human participant will experience.
 - To what extent the budget clearly justifies how the proposed clinical trial will be supported with funds from this award.
 - If applicable, how well the application describes whether the proposed clinical trial was initiated using other funding prior to this application and whether the portions of the study supported with funds from this award are clearly articulated.
 - Whether the detailed plans for initiating the clinical trial within the first year are feasible.
 - If applicable, to what extent the application describes how data will be reported and how it will be assured that the documentation will support a regulatory filing.
 - To what extent the application includes appropriate plans and/or documentation in support of Regulatory Agency submissions and/or approvals.

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- **Questionnaires and Other Data Collection Instruments (if applicable)**
 - Whether the application includes a copy of the most recent version of questionnaires, data collection forms, rating scales, interview guides or other instruments.
 - For each instrument, to what extent the application describes how the information collected is related to the objectives of the study.
 - Whether the application describes how and when the instrument(s) will be administered.
 - If applicable, whether the application describes how the instrument(s) will be adapted to the subject population.

In addition, the following criteria will also contribute to the overall evaluation of the application, but will not be individually scored and are therefore termed **unscored criteria**:

- **Research Sharing Plan**
 - To what extent the plan for sharing of project data and research resources is appropriate and reasonable and includes dissemination to affected communities, study participants and/or the scientific community. If applicable, whether specific repository(ies) are named where data and research resources arising from the project will be stored.
- **Budget**
 - Whether the budget is appropriate for the proposed research.
- **Environment**
 - To what extent the scientific environment and level of institutional support is appropriate for the proposed research project.
 - How well the research requirements are supported by the availability of and accessibility to facilities and resources.
- **Application Presentation**
 - To what extent the writing, clarity and presentation of the application components influence the review.
 - Whether the lay abstracts and impact statements are written with clarity for persons without a background in science or medicine.

6.2.3. Programmatic Review

To make funding recommendations and select the application(s) that, individually or collectively, will best achieve the program objectives, the following criteria are used by programmatic reviewers:

- Ratings and evaluations of peer reviewers
- Relevance to the priorities of the FY26 MRP, as evidenced by the following:
 - Adherence to the intent of the funding opportunity
 - Relative impact on melanoma survivorship
 - Program portfolio balance
 - Relevance to military health

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6.3. Application Review and Selection Process

6.3.1. Pre-Application

There is no review and selection process for pre-applications submitted to this funding opportunity. **CDMRP will NOT provide an invitation to submit a full application after pre-application submission.** Applicants are encouraged to develop pre-application and full application components concurrently and submit a full application AFTER successful submission of the pre-application.

6.3.2. Full Application

All applications are evaluated by scientists, clinicians and consumers in a two-tier review process. The first tier is **peer review**, the evaluation of applications against established criteria to determine technical merit, where each application is assessed for its own merit, independent of other applications. The second tier is **programmatic review**, a comparison-based process in which applications with high scientific and technical merit are further evaluated for programmatic relevance. Final recommendations for funding are subject to review and approval by a designated official. **The highest-scoring applications from the first tier of review are not automatically recommended for funding. Funding recommendations depend on various factors as described in [Section 6.2.3, Programmatic Review](#).** Additional information about the two-tier process used by the CDMRP can be found on the [CDMRP website](#).

Funding of applications received is contingent upon the availability of federal funds for this program, the number of applications received, the quality and merit of the applications as evaluated by peer and programmatic review, and the requirements of the government. Funds to be obligated on any award resulting from this funding opportunity will be available for use for a [limited time period](#) based on the fiscal year of the funds.

6.4. Risk, Integrity and Performance Information

Prior to making an assistance agreement award where the federal share is expected to exceed the simplified acquisition threshold, as defined in the Code of Federal Regulations, Title 2, Part 200.1 (2 CFR 200.1), over the period of performance, the federal awarding agency is required to review and consider any information about the applicant that is available in the SAM.

An applicant organization may review the SAM and submit comments on any information currently available about the organization that a federal awarding agency previously entered. The federal awarding agency will consider any comments by the applicant, in addition to other information in the designated integrity and performance system, in making a judgment about the applicant's integrity, business ethics and record of performance under federal awards when determining a recipient's qualification prior to award, according to the qualification standards of the Department of Defense Grant and Agreement Regulations (DoDGARs), Section 22.415.

In accordance with National Security Presidential Memorandum-33 and all associated laws, all fundamental research funded by the DOW must be evaluated for affiliations with foreign entities. All applicant organizations must disclose foreign affiliations of all key personnel named on applications. Failure to disclose foreign affiliations of key personnel shall lead to withdrawal of recommendations to fund applications. Applicant organizations may be presented with an opportunity to mitigate identified risks, particularly those pertaining to influence from foreign entities specified in law. Implementation of mitigation discussions and utilization of the [DOD Component Decision Matrix](#) must decrease risk of foreign influence in accordance with the above-mentioned laws and guidance prior to award.

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7. Federal Award Notices

For each compliant full application received, the organizational representative(s) and PI will receive email notification when the funding recommendations are posted to eBRAP, typically within 6 weeks after programmatic review. At this time, each PI will receive a peer review summary statement on the strengths and weaknesses of the application and an information paper describing the application receipt and review process for the MRP award mechanisms. The information papers and a list of organizations and PIs recommended for funding are also posted on the program's page within the CDMRP website. After all awards are made, the CDMRP includes individual award information in a searchable [database](#).

If an application is recommended for funding, after the email notification is posted to eBRAP, a government representative will contact the person authorized to negotiate on behalf of the recipient organization.

Only an appointed DHACA Grants Officer may obligate the government to the expenditure of funds to an extramural organization. No commitment on the part of the government should be inferred from discussions with any other individual. ***The award document signed by the Grants Officer is the official authorizing document (i.e., assistance agreement).***

Intragovernmental obligations of funding will be made according to the terms of a negotiated Inter-Agency Agreement and managed by a CDMRP Science Officer.

Funding obligated to ***intragovernmental and intramural DOW organizations*** will be sent through the Military Interdepartmental Purchase Request (MIPR), Funding Authorization Document (FAD) or Direct Charge Work Breakdown Structure processes. Transfer of funds is contingent upon appropriate safety and administrative approvals. Intragovernmental and intramural DOW investigators and collaborators must coordinate receipt and commitment of funds through their respective Resource Manager/Task Area Manager/Comptroller or equivalent Business Official. 

An organization may, at its own risk and without the government's prior approval, incur obligations and expenditures to cover costs up to 90 days before the beginning date of the initial budget period of a new award.

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8. Post-Award Requirements


8.1. Administrative and National Policy Requirements

Applicable requirements in the DoDGARs found in 32 CFR, Chapter I, Subchapter C, and 2 CFR, Chapter XI, apply to grants and cooperative agreements resulting from this program announcement.

The GAI contain information regarding [administrative requirements](#) and [national policy requirements](#).

Refer to full text of the latest [DoD R&D Terms and Conditions](#) and the [DHACA Terms and Conditions](#) for further information.

If there are delinquencies in technical reporting requirements for any existing Defense Health Agency (DHA) or U.S. Army Medical Research and Development Command awards at the applicant organization, DHACA will not issue any new awards to the applicant organization until all delinquent reports have been submitted.

Applications recommended for funding that involve animals, human data, human specimens, human subjects or human cadavers must be reviewed for compliance with federal animal and/or human subjects protection requirements and must be approved by the DHA R&D Office of Research and Regulatory Compliance (ORRC), prior to implementation. This administrative review requirement is in addition to the local Institutional Animal Care and Use Committee (IACUC), IRB or Ethics Committee (EC) review. 

Funded trials are required to post a copy of the informed consent form used to enroll subjects on a publicly available federal website in accordance with federal requirements described in 32 CFR 219. Additionally, the CDMRP requires all funded clinical trials to register and submit study results on [ClinicalTrials.gov](#).

8.2. Reporting

Annual technical progress reports as well as a final technical progress report will be required. Annual and final technical progress reports must be prepared in accordance with the Research Performance Progress Report (RPPR).

The Award Terms and Conditions will specify whether additional and/or more frequent reporting is required.

Award Expiration Transition Plan: An [Award Expiration Transition Plan](#), using the template available on eBRAP, must be submitted with the final progress report.

PHS Inclusion Enrollment Reporting (***Required for projects involving clinical research and/or clinical trials***): Enrollment reporting on the basis of sex, race and/or ethnicity will be required with each annual and final progress report. The [PHS Inclusion Enrollment Report](#) is available on eBRAP.


Awards resulting from this program announcement may entail additional reporting requirements related to recipient integrity and performance matters. Recipient organizations that have federal contract, grant and cooperative agreement awards with a cumulative total value greater than \$10M are required to provide information to the SAM about certain civil, criminal and administrative proceedings that reached final disposition within the most recent 5-year period and that were connected with their performance of a federal award. These recipients are

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required to disclose, semiannually, information about criminal, civil and administrative proceedings as specified in the applicable [Representations](#).

8.3. Additional Requirements

Unless otherwise restricted, changes in the PI or organization will be allowed on a case-by-case basis, provided the intent of the award mechanism is met. 

The organizational transfer of an award supporting a clinical trial is strongly discouraged and in most cases will not be allowed. Approval of a transfer request will be on a case-by-case basis at the discretion of the Grants Officer.

An organizational transfer of an award will not be allowed in the last year of the original period of performance or any extension thereof.

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9. Other Information

9.1. Program Announcement Version

Questions related to this program announcement should refer to the program name, the program announcement name and the program announcement version code CD26_01d.

9.2. Administrative Actions

After receipt of full applications, the following administrative actions may occur.

9.2.1. Rejection

The following will result in administrative rejection of the full application:

- The Project Narrative is missing.
- The Budget is missing.
- Pre-application was not submitted.

9.2.2. Modification

- Pages exceeding the specified limits will be removed prior to reviewing all documents.
- Documents not requested will be removed.

9.2.3. Withdrawal

The following may result in administrative withdrawal of the full application:

- A member of the FY26 MRP Programmatic Panel is named as being involved in the development or execution of the research proposed or is found to have assisted in the pre-application or application processes.
- The application includes the name(s) of personnel from either of the CDMRP peer or programmatic review companies for which conflicts cannot be adequately mitigated. For FY26, the identities of the peer review contractor and the programmatic review contractor may be found on the [CDMRP website](#).
- Personnel from applicant or collaborating organizations are found to have contacted persons involved in the review or approval process to gain protected evaluation information or to influence the evaluation process.
- The application from an extramural organization, including non-DOW federal agencies, is received through eBRAP.
- The federal government recipient organization (including an intramural DOW organization):
(a) cannot accept and execute the entirety of the requested budget in FY26 funds; and/or (b) cannot coordinate the use of contractual, assistance or other appropriate agreements to provide funds to collaborators.
- The application fails to conform to this program announcement description.

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- The application includes URLs, with the exception of links in the References Cited and Publication and/or Patent sections.
- The application includes research data that are classified and/or proposes research that may produce classified outcomes, or outcomes deemed sensitive to national security concerns.
- The same research project is submitted to different funding opportunities within the same program and fiscal year.
- An investigator may only be named as a PI on a single FY26 MRP full application. If an investigator is named as a PI, Initiating PI or Partnering PI on multiple full application submissions, only the first application received for the PI will be accepted; additional full applications may be administratively withdrawn.
- The PI does not meet the [eligibility criteria](#).
- The main subject of the research is non-melanoma skin cancers.
- An application that proposes a clinical trial is missing the [Clinical Trial Strategy Statement](#).
- At least one melanoma consumer collaborator is not included on the research team as required by this program announcement.

9.2.4. Withhold

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending organizational investigation. The organization will be required to provide the findings of the investigation to the DHACA Grants Officer for a determination of the final disposition of the application.

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Appendix 1. Full Application Submission Checklist

| Full Application Components | Uploaded |
|---|--------------------------|
| SF424 Research & Related Application for Federal Assistance <i>(Grants.gov submissions only)</i> | <input type="checkbox"/> |
| Summary (Tab 1) and Application Contacts (Tab 2) <i>(eBRAP submissions only)</i> | <input type="checkbox"/> |
| Attachments | |
| Project Narrative – Attachment 1, upload as “ProjectNarrative.pdf” | <input type="checkbox"/> |
| Supporting Documentation – Attachment 2, upload as “Support.pdf” | <input type="checkbox"/> |
| Technical Abstract – Attachment 3, upload as “TechAbs.pdf” | <input type="checkbox"/> |
| Lay Abstract – Attachment 4, upload as “LayAbs.pdf” | <input type="checkbox"/> |
| Statement of Work – Attachment 5, upload as “SOW.pdf” | <input type="checkbox"/> |
| Impact Statement – Attachment 6, upload as “Impact.pdf” | <input type="checkbox"/> |
| Melanoma Consumer Collaboration Plan – Attachment 7, upload as “Consumer.pdf” | <input type="checkbox"/> |
| Clinical Trial Strategy Statement <i>(if applicable)</i> – Attachment 8, upload as “Clinical.pdf” | <input type="checkbox"/> |
| Questionnaires and Other Data Collection Instruments <i>(if applicable)</i> – Attachment 9, upload as “Questionnaire.pdf” | <input type="checkbox"/> |
| Post-Award Transition Plan – Attachment 10, upload as “Transition.pdf” | <input type="checkbox"/> |
| Representations <i>(Grants.gov submissions only)</i> – Attachment 11, upload as “RequiredReps.pdf” | <input type="checkbox"/> |
| Suggested Intragovernmental/Intramural Budget Form <i>(if applicable)</i> – Attachment 12, upload as “IGBudget.pdf” | <input type="checkbox"/> |
| Additional Application Materials | |
| Research & Related Senior/Key Person Profile (Expanded) | <input type="checkbox"/> |
| Attach Biographical Sketch for Senior/Key Persons (Biosketch_LastName.pdf) | <input type="checkbox"/> |
| Attach Current/Pending Support for Senior/Key Persons (Support_LastName.pdf) | <input type="checkbox"/> |
| Research & Related Budget | <input type="checkbox"/> |
| Project/Performance Site Location(s) | <input type="checkbox"/> |
| Research & Related Subaward Budget Attachment(s) <i>(if applicable)</i> | <input type="checkbox"/> |

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Appendix 2. Acronym List

| | |
|--------------|---|
| ARRIVE | Animal Research: Reporting <i>In Vivo</i> Experiments |
| CDMRP | Congressionally Directed Medical Research Programs |
| CFR | Code of Federal Regulations |
| DHA | Defense Health Agency |
| DHA R&D | Defense Health Agency Research and Development |
| DHA R&D-MRDC | Defense Health Agency Research and Development Medical Research and Development Command |
| DHACA | Defense Health Agency Contracting Activity |
| DOD | U.S. Department of Defense |
| DoDGARs | Department of Defense Grant and Agreement Regulations |
| DOW | U.S. Department of War |
| eBRAP | Electronic Biomedical Research Application Portal |
| EC | Ethics Committee |
| ET | Eastern Time |
| FAD | Funding Authorization Document |
| FDA | U.S. Food and Drug Administration |
| FY | Fiscal Year |
| IRB | Institutional Review Board |
| LOI | Letter of Intent |
| M | Million |
| MIPR | Military Interdepartmental Purchase Request |
| MRP | Melanoma Research Program |
| NCI | National Cancer Institute |
| NIH | National Institutes of Health |
| ORRC | Office of Research and Regulatory Compliance |
| PDF | Portable Document Format |
| PHS | Public Health Service |
| PI | Principal Investigator |
| R&D | Research and Development |
| RPPR | Research Performance Progress Report |
| SABV | Sex as a Biological Variable |
| SAM | System for Award Management |
| SF424 R&R | Standard Form 424 (Application for Federal Assistance, Research & Related) |
| SOW | Statement of Work |
| SRA | Survivorship Research Award |

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| | |
|-----|-------------------------------------|
| UEI | Unique Entity Identifier |
| URL | Uniform Resource Locator |
| USC | United States Code |
| VA | U.S. Department of Veterans Affairs |