



Research Award Program

**Cutaneous Lymphoma
Catalyst Research Grant
Application Checklist**

Appendix A: Application Checklist

Cutaneous Lymphoma Foundation Research Awards Program Application Checklist

Applicant Name:

Title of Research Project:

The following materials must be submitted electronically with your application:

- | | |
|--|--------------------------|
| Application Checklist | <input type="checkbox"/> |
| Research Award Application Page | <input type="checkbox"/> |
| Title page and abstract | <input type="checkbox"/> |
| Layman's statement | <input type="checkbox"/> |
| Budget | <input type="checkbox"/> |
| Applicant's biographical sketch (use NIH format) | <input type="checkbox"/> |
| Research proposal | <input type="checkbox"/> |

All application materials must be submitted electronically to research@clfoundation.org.

Subject: Cutaneous Lymphoma Catalyst Research Grant

Application Contact Information

Cutaneous Lymphoma Foundation
PO Box 374
Birmingham, MI 48012
Phone and Fax: 248.644.9014
<https://www.clfoundation.org/catalyst>
research@clfoundation.org