



**Program Announcement for the Department of Defense
Defense Health Program**

Amyotrophic Lateral Sclerosis Research Program Clinical Outcomes and Biomarkers Award

Funding Opportunity Number: HT942525ALSRPCOBA

Pre-Application Due: June 6, 2025

Application Due: August 27, 2025

This program announcement must be read in conjunction with the General Application Instructions, version [CD25_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 the 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 the funding opportunity and that all parties meet eligibility requirements.

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 Contact 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 Alt + left arrow key (Windows) or command + left arrow key (Macintosh) on your keyboard.

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1. Basic Information About the Funding Opportunity

Summary: The fiscal year 2025 (FY25) Amyotrophic Lateral Sclerosis Research Program (ALSRP) Clinical Outcomes and Biomarkers Award (COBA) supports the development and/or validation of clinical outcomes and biomarkers to enrich clinical trials in Amyotrophic Lateral Sclerosis (ALS). Projects can be relevant to a specific therapy, a class of therapeutics, or to a specific ALS subtype (such as a particular genetic mutation) and do not have to broadly apply to all patients.

To meet the intent of the funding opportunity, applications must address ONE or BOTH of the following focus areas:

Clinical Biomarkers: Identification, development, and/or validation of promising biomarkers for ALS. Biomarkers may include, but are not limited to susceptibility/risk, diagnostic, monitoring/disease progression, prognostic, predictive, response, or safety biomarkers.

Clinical Outcomes: Identification, development, and/or validation of clinician-, observer-, or patient-reported, and/or performance outcome measures for ALS. Projects may include optimization of current outcome measures already in use.

Both focus areas are permitted to utilize digital health measures, including wearable devices, smart-phone sensors, video or voice recordings, imaging studies, or other devices which record disease-relevant physiological data and/or outcomes.

Distinctive Features: Applications proposing prospective biospecimen collection or participant enrollment are required to incorporate a Community Collaboration, as described in [Attachment 9](#).

Funding Details: The Congressionally Directed Medical Research Programs (CDMRP) expects to allot approximately \$6.2 million (M) to fund approximately five Clinical Outcomes and Biomarkers Award applications with direct cost caps of \$0.75M. The maximum period of performance is three years. It is anticipated that awards made from this FY25 funding opportunity will be funded with FY25 funds, which will expire for use on September 30, 2031. Awards supported with FY25 funds will be made no later than September 30, 2026.

Submission and Review Dates and Times

- **Pre-Application (Preproposal) Submission Deadline:** 5:00 p.m. Eastern Time (ET), June 6, 2025
- **Invitation to Submit an Application:** July 10, 2025
- **Application Submission Deadline:** 11:59 p.m. ET, August 27, 2025
- **End of Application Verification Period:** 5:00 p.m. ET, September 3, 2025
- **Peer Review:** October 2025
- **Programmatic Review:** December 2025

Announcement Type: Initial

Funding Opportunity Number: HT942525ALSRPCOBA

Assistance Listing Number: 12.420

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2. Eligibility Information

2.1. Eligible Applicants

2.1.1. Organization

Extramural and intramural organizations are eligible to apply, ***including foreign and domestic organizations, for-profit and non-profit organizations, and public or private entities.***

Extramural Organization: An eligible non-Department of Defense (DOD) organization. Examples of extramural organizations include academic institutions, biotechnology companies, foundations, federal government organizations other than the DOD (i.e., intragovernmental organizations), and research institutes.

Intramural DOD Organization: Refers specifically to DOD organizations including DOD laboratories, DOD military treatment facilities, and/or DOD activities embedded within a civilian medical center.

2.1.2. Principal Investigator

Independent investigators at all career levels may be named by the organization as the Principal Investigator (PI) on the application.

For titles outside of academia that may not be analogous to traditional hierarchies, investigators at or above an independent scientist level may be named by their organization as the PI on the application.

Individuals affiliated with an eligible organization are eligible to be named as PI 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 General Application Instructions, Appendix 1, for additional recipient qualification requirements.

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3. Program Description

The U.S. Army Medical Research Acquisition Activity (USAMRAA) is soliciting applications to this funding opportunity using delegated authority provided by United States Code, Title 10, Section 4001 (10 USC 4001). The CDMRP at the U.S. Army Medical Research and Development Command (USAMRDC) is the program office managing this FY25 funding opportunity as part of the ALSRP. Congress initiated the ALSRP in 2007 to provide support for research of high potential impact and exceptional scientific merit. Appropriations for the ALSRP from FY07 through FY24 totaled \$269.4M. The FY25 appropriation is \$40M.

3.1. Intent of the Clinical Outcomes and Biomarkers Award

The FY25 ALSRP COBA supports the development and/or validation of clinical outcomes and biomarkers to enrich clinical trials in Amyotrophic Lateral Sclerosis (ALS). Projects can be relevant to a specific therapy, a class of therapeutics, or to a specific ALS subtype (such as a particular genetic mutation) and do not have to broadly apply to all patients.

Research may include, but is not limited to:

- Target engagement biomarkers.
- Pharmacodynamic biomarkers to measure the biological effect of an investigational therapeutic.
- Predictive/cohort-selective biomarkers that indicate whether a specific therapy is likely to be effective in an individual patient or patient subgroup.
- Diagnostic, prognostic, phenotypic conversion, and/or disease progression biomarkers.
- Clinician-, observer-, patient-reported, and/or performance outcomes to better support clinical trial success metrics.
- Define ALS subtypes using patient-based resources, such as biosamples and/or digital data elements linked to rigorous molecular and clinical data.
- Add the collection of biospecimens, outcome measures, or digital health data to an on-going or planned clinical trial.
- Correlate clinical-trial related data (e.g., analysis of biosamples, imaging, and/or digital health data) with clinical outcomes or responses to therapies.

3.1.1. Focus Areas for the COBA

To meet the intent of the funding opportunity, applications must address ONE or BOTH of the following focus areas:

Clinical Biomarkers: Identification, development, and/or validation of promising biomarkers for ALS. Biomarkers may include, but are not limited to susceptibility/risk, diagnostic, phenotypic conversion, monitoring/disease progression, prognostic, predictive, response, or safety biomarkers.

Clinical Outcomes: Identification, development, and/or validation of clinician-, observer-, or patient-reported, and/or performance outcome measures for ALS. Projects may include optimization of current outcome measures already in use.

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Both focus areas are permitted to utilize digital health measures, including wearable devices, smart-phone sensors, video or voice recordings, imaging studies, or other devices which record disease-relevant physiological data and/or outcomes.

3.1.2. Key Elements for the COBA

Use of existing well-characterized and highly curated clinical resources is encouraged. Examples of patient-based ALS resources include ongoing or completed clinical trial datasets, biorepositories of clinical specimens, registries (e.g., Centers for Disease Control and Prevention National ALS Registry and/or Biorepository; <https://www.cdc.gov/als/Default.html>), large omics datasets, patient-report outcomes, digital biomarker datasets, and databases of clinical data and/or metadata. Active-duty military and/or Veteran patient populations or resources should be considered. Collaboration with the DOD and/or VA is also encouraged. A list of websites that may be useful in identifying additional information about ongoing DOD and VA areas of research interest or potential opportunities for collaboration can be found in [Appendix 3](#). A list of suitable ALS-specific [resources](#) can be found on the ALSRP web page. Other resources may be used, provided they have an adequate description of repository parameters and mechanisms for broad access.

A strong Data and Research Resources Sharing Plan is a critical component for a successful COBA application.

Studies prospectively enrolling patients to collect biospecimens and/or clinical or digital data are permitted. The proposed studies may be stand-alone or add-on noninterventional clinical research studies. However, clinical trials are not allowed under this mechanism.

Employing community collaborations to optimize research impact; research funded by the FY25 ALSRP COBA should be responsive to the needs of people with ALS, their families, and/or their care partners. ***Applications proposing prospective biospecimen or participant enrollment are required to incorporate a Community Collaboration*** to provide advice and consultation throughout the planning and implementation of the research project.

The Community Collaboration participants should have meaningful and ongoing input on all aspects of projects which involve prospective recruitment, which can include needs assessment, planning, research intervention design, implementation, evaluation, and dissemination. These collaborations are expected to facilitate accessible, efficient, and humane research approaches. Interactions with other team members should be well integrated and ongoing, and not limited to attending seminars and semi-annual meetings. Examples of Community Collaborations include (only one collaboration is required):

- **Person(s) Living with ALS, Family Member(s), and/or Caregiver(s):** The research team includes persons with ALS, their family members, or caregivers (past or present) as project advisors who will provide advice and consultation throughout the planning and implementation of the research project.
- **Partnership with a Community-Based Organization:** The research team establishes a partnership with at least one community-based organization that provides advice and consultation throughout the planning and implementation of the research project. Community-based organizations may include advocacy groups, service providers, policymakers, or other formal organizational stakeholders.
- **Community Advisory Board:** A community advisory board is composed of multiple community stakeholders and can take many forms, from a board of people living with ALS, their family members, or caregivers to a coalition of community-based organizations, or any

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combination thereof. As with people living with ALS and organizational partners, the community advisory board provides advice and consultation throughout planning and implementation of the research project.

A description of the biomarker category and intended context of use (COU), including regulatory considerations for use in ALS clinical trials or clinical practice, is an important component. For further information on biomarker types, qualifications, and use in ALS clinical trials, it is recommended that applicants consult the following resources:

- BEST (Biomarkers, EndpointS, and other Tools) Resource.
<https://www.ncbi.nlm.nih.gov/books/NBK326791/>
- National Institute of Neurological Disorders and Stroke (NINDS) Biomarker Program.
<https://www.ninds.nih.gov/current-research/focus-tools-topics/focus-biomarkers-research>
- U.S. Food and Drug Administration (FDA) Biomarker Qualification Program.
<https://www.fda.gov/drugs/drug-development-tool-ddt-qualification-programs/biomarker-qualification-program>
- FDA Guidance Document – “Amyotrophic Lateral Sclerosis: Developing Drugs for Treatment Guidance for Industry.” September 2019. <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/amyotrophic-lateral-sclerosis-developing-drugs-treatment-guidance-industry>
- Verber N.S., S.R. Shephard, M. Sassani, et al. 2019. “Biomarkers in Motor Neuron Disease: A State of the Art Review.” *Frontiers in Neurology* 10:291.
<https://www.frontiersin.org/articles/10.3389/fneur.2019.00291/full>
- van den Berg, L.H., E. Sorenson, G. Gronseth, et al. 2019. “Revised Airlie House Consensus Guidelines for Design and Implementation of ALS Clinical Trials.” *Neurology* 92(14):e1610-e1623. <https://n.neurology.org/content/92/14/e1610>
- Benatar, M., K. Boylan, A. Jeromin, et al. 2016. “ALS Biomarkers for Therapy Development: State of the Field and Future Directions.” *Muscle Nerve* 53(2):169-182.
<https://doi.org/10.1002/mus.24979>

For further information on digital health guidance guidelines, it is recommended that applicants consult the following resources:

- Perrin Franck, C., A. Babington-Ashaye, D. Dietrich, et al. 2023. “iCHECK-DH: Guidelines and Checklist for the Reporting on Digital Health Implementations.” *Journal of Medical Internet Research* 25: e46694. <https://doi.org/10.2196/46694>
- Vasudevan, S., A. Saha, M.E. Tarver, et al. 2022. “Digital Biomarkers: Convergence of Digital Health Technologies and Biomarkers.” *NPJ Digital Medicine* 5(1):36.
<https://doi.org/10.1038/s41746-022-00583-z>

For projects proposing the use large data sets for training predictive models, a discussion of mechanisms for addressing rigor in model design, training, and assessment should be provided. Depending upon the context, this might include: algorithmic designs to avoid overfitting, saliency analysis, feature attribution, node ablation, or other alternate strategies.

3.1.3. Other Important Considerations for the COBA

The ALSRP aims to improve the health, care, and well-being of military Service Members, Veterans, their families, and the American public affected by ALS. Evidence from scientific research suggests a mutually inclusive relationship between ALS and military service, with a

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higher rate of incidence in the Veteran population, without any known reason(s) for this incidence. Knowledge, information, products, or technologies gained from the proposed research should advance research that is of significance to Service Members, Veterans, and/or their Families.

A clinical trial is defined in the Code of Federal Regulations, Title 45, Part 46.102 (45 CFR 46.102) as a research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include a placebo or another control) to evaluate the effects of the interventions on biomedical or behavioral health-related outcomes. An **intervention** includes both physical procedures by which information or biospecimens are gathered and manipulations of the subject or the subject's environment that are performed for research purposes.

Studies that do not seek to measure safety, effectiveness, and/or efficacy outcome(s) of an intervention are not considered clinical trials.

For the purposes of this funding opportunity, research that meets the definition of a clinical trial is distinct from clinical research. Clinical research encompasses research with human data, human specimens, and/or interaction with human subjects. Clinical research is observational in nature and includes:

(1) Research conducted with human subjects and/or material of human origin such as data, specimens, and cognitive phenomena for which an investigator (or co-investigator) does **not** seek to assess the safety, effectiveness, and/or efficacy outcomes of an intervention. Research meeting this definition may include but is not limited to: (a) mechanisms of human disease; (b) diagnostic or detection studies (e.g., biomarker or imaging); (c) health disparity studies; and (d) development of new technologies.

(2) Epidemiologic and behavioral studies that do **not** seek to assess the safety, effectiveness, and/or efficacy outcomes of an intervention.

(3) Outcomes research and health services research that do not fit under the definition of clinical trial.

Excluded from the definition of clinical research are in vitro studies that utilize human data or specimens that cannot be linked to a living individual and meet the requirements for exemption under [§46.104\(d\)\(4\) of the Common Rule](#).

3.2. CDMRP-wide Encouragements

The following encouragements are broadly applicable across many CDMRP programs, including the ALSRP. Investigators are encouraged to consider addressing these areas in their applications if doing so is appropriate for their line of research and meets the intent of this funding opportunity.

Innovative research involving nuclear medicine and related techniques to support early diagnosis, more effective treatment, and improved health outcomes of Service Members and their Families is encouraged. Such research could improve diagnostic and targeted treatment capabilities through noninvasive techniques and may drive the development of precision imaging and advanced targeted therapies.

The CDMRP encourages research on health areas and conditions that affect women uniquely, disproportionately, or differently from men. Such research should relate anticipated project findings to improvements in women's health outcomes and/or advancing knowledge for women's health.

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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 **three** years.

Cost Cap: The application's direct costs budgeted for the entire period of performance should not exceed **\$750,000**. 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 **three** 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 two scientific/technical meetings per year. The intent of travel to scientific/technical meetings should be to present project information or disseminate project results from the ALSRP Clinical Outcomes and Biomarkers Award.

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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 DOD 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. Step 1: Pre-Application Components

Pre-application submissions must include the following components.

Note: Upload documents as individual PDF files unless otherwise noted.

- **Preproposal Narrative (three-page limit):** The Preproposal Narrative page limit applies to text and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings) used to describe the project. Inclusion of URLs that provide additional information to expand the Preproposal Narrative and could confer an unfair competitive advantage is prohibited and may result in administrative withdrawal of the pre-application.

The Preproposal Narrative should include the following:

- **Use of Clinical ALS Resources:** Summarize how the project will prospectively collect clinical samples/data or will leverage existing ALS repositories and/or datasets.
 - **Biomarker Development:** Describe the biomarker category and intended COU in ALS therapy development, including regulatory considerations for use in ALS clinical trials or clinical practice. Reference the FDA Biomarker Qualification Program for COU definitions and examples <https://www.fda.gov/drugs/biomarker-qualification-program/context-use>. Concisely state the project's hypothesis, specific aims, and feasibility of the scientific approach.
 - **Data Sharing:** Describe plans to make results or outcomes available for use by others. Include considerations of existing, publicly available, curated ALS repositories.
 - **Clinical Impact in the Intended Population:** Explain how the proposed project will advance development and/or validation of biomarkers for disease progression, assessing prognosis, or is relevant to a specific therapeutic (or class of therapeutics), or to a specific type of ALS (such as a particular genetic mutation) with potential to better define subsets.
- **Pre-Application Supporting Documentation:** The items to be included as supporting documentation for the pre-application ***must be uploaded as individual files*** and are limited to the following:
 - **References Cited (one-page limit):** List the references cited (including URLs if available) in the Preproposal Narrative using a standard reference format that includes

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the full citation (i.e., author[s], year published, reference title, and reference source, including volume, chapter, page numbers, and publisher, as appropriate).

- **List of Abbreviations, Acronyms, and Symbols:** Provide a list of abbreviations, acronyms, and symbols used in the Preproposal Narrative.
- **Key Personnel Biographical Sketches:** *All biographical sketches should be uploaded as a single combined file.* Biographical sketches should be used to demonstrate background and expertise through education, positions, publications, and previous work accomplished.

4.3. Step 2: Full Application Components

Applicants must receive an invitation to submit a full application. Uninvited full application submissions will be rejected.

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):** Refer to the General Application Instructions, Section V.B.(a), for detailed information.

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 listed in the General Application Instructions, Appendix 2.

- **Attachment 1: Project Narrative (12-page limit): Upload as “ProjectNarrative.pdf”.** The page limit of the Project Narrative applies to text and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings) used to describe the project. Inclusion of URLs (uniform resource locators) that provide additional information that expands the Project Narrative and could confer an unfair competitive advantage is prohibited and may result in administrative withdrawal of the application.

The Project Narrative should be structured in accordance with the outline below. If necessary, additional subheadings may be used.

- **Background and Scientific Rationale:** Explain why the proposed research is important and how it is addressing one or more of the FY25 ALSRP COBA focus areas. Describe the scientific rationale on which the proposed work is based. Demonstrate feasibility as demonstrated by a critical review and analysis of published literature, logical reasoning, and presentation of published or unpublished preliminary data. Strong rationale and feasibility, showing proof of concept and clinical relevance of the proposed research, are critical.
- **For Clinical Outcome Studies:** Describe the clinician-, observer-, or patient-reported outcome with respect to ALS biology or clinical relevance. Describe how easily this outcome may be incorporated into future clinical trials of a proposed therapeutic.

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- **For Clinical Biomarker Studies:** Describe feasibility of the biomarker with respect to ALS biology or clinical relevance. Clearly describe the biomarker category and intended COU in ALS therapy development, including regulatory considerations for use in ALS clinical trials or clinical practice. Reference the FDA Biomarker Qualification Program for COU definitions and examples [here](#). Describe how the proposed study has the potential to lead to major advancements in ALS treatment or to better define subsets for clinical treatment. The inclusion of a decision-tree diagram that explicitly illustrates the application of the biomarkers and includes the anticipated actions to be taken based on the biomarker results is recommended. Describe how easily and reliably the biomarkers may be implemented in eventual clinical trials of a proposed novel therapeutic.
- **Research Strategy and Specific Aims:** Describe the experimental design, methods, and statistical plan and analyses, including appropriate controls and endpoints, in sufficient detail.
 - Describe the type of ALS patient specimen, patient data, and/or existing cohort being leveraged and explain how the resource is appropriate for the objectives of the study.
 - Provide statistical considerations to demonstrate that the work is appropriately powered.
 - If human subjects will be recruited for patient specimen collection, describe the study population, and include a detailed plan for recruitment (additional information should be provided in attachment 8). ***This award may not be used to conduct clinical trials.***
 - Describe whether the population selected to participate in the study stands to benefit from the knowledge to be gained as a result of the proposed research, how the level of risk to study participants is minimized, what safety monitoring and reporting measures are taken for the level of risk.
 - Concisely explain the project’s specific aims to be funded by this award. Describe how data will be collected, handled, and analyzed (including a detailed statistical plan) in a manner consistent with the study objectives.
 - Describe plans to make results or outcomes available for use by others. **Details of data and resource sharing should be provided in [Attachment 11, Data and Research Resources Sharing Plan](#).**
 - Describe potential challenges and alternative strategies where appropriate.
- **Attachment 2: Supporting Documentation: Combine and upload as a single file named “Support.pdf”.** Start each document on a new page. The Supporting Documentation attachment should not include additional information such as figures, tables, graphs, photographs, diagrams, chemical structures, or drawings. These items should be included in the Project Narrative.

There are no page limits for any of these components unless otherwise noted. Include only those 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 (including URLs, if available) in the Project Narrative using a standard reference format.

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- **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 and 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 should be made to the original or present government award under which the facilities or equipment items are now accountable. There is no 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(s) meet [eligibility criteria](#). If applicable, provide a letter of support, signed by the lowest-ranking person with approval authority, confirming participation of intramural DOD collaborator(s) and/or access to military populations, databases, or DOD resources. If applicable, provide a letter of support signed by the U.S. Department of Veterans Affairs (VA) Facility Director(s), or individual designated by the VA Facility Director(s), confirming access to VA patients, resources, and/or VA research space.
- **Sex as a Biological Variable 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.
- **Attachment 3: Technical Abstract (one-page limit): Upload as “TechAbs.pdf”.** The technical abstract is used by all reviewers. ***Abstracts of all funded research projects will be posted publicly.*** Use only characters available on a standard QWERTY keyboard; spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

Technical abstracts should be written using the outline below. Clarity and completeness within the space limits are highly important.

- **Background:** Present the scientific rationale behind the proposed research project.
- **Hypothesis/Objective(s):** State the hypothesis to be tested and/or objective(s) to be reached.
- **Specific Aims:** State the specific aims of the study.
- **Study Design:** Describe the study design, including appropriate controls.

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- **Impact:** Explain how the proposed project has the potential to lead to critical discoveries or major advancements in clinical outcomes, disease progression markers, for a specific therapeutic or class of therapeutics, or for a specific type of ALS (such as a particular genetic mutation) to better define subsets.
- **Attachment 4: Lay Abstract (one-page limit): Upload as “LayAbs.pdf”.** The lay abstract is used by all reviewers and addresses issues of particular interest to the affected community. **Abstracts of all funded research projects will be posted publicly.** Use only characters available on a standard QWERTY keyboard; spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed. **Do not duplicate the technical abstract.**

Lay abstracts should address the points outlined below *in a manner that will be readily understood by readers without a background in science or medicine*. Avoid overuse of scientific jargon, acronyms, and abbreviations.

 - Describe the ultimate applicability of the research.
 - What type(s) of ALS patients will it help and how will it help them?
 - What are the potential clinical applications, benefits, and risks?
 - What is the projected time it may take to achieve a patient-related outcome?
 - What are the likely contributions of this study to improve treatments and find cures for ALS?
- **Attachment 5: Statement of Work (three-page limit): Upload as “SOW.pdf”.** Refer to eBRAP for the [“Suggested SOW Format”](#).

For the Clinical Outcomes and Biomarkers Award, 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 example is most appropriate for the proposed effort, for guidance on preparing the SOW.
- **Attachment 6: Letter(s) Confirming Access to Population(s) or ALS Patient Resource(s), if applicable (one-page limit per letter): Upload as “Access.pdf.”:** Provide a letter of support signed by the appropriate institution official who has the authority to confirm access to the proposed population(s) or resource(s) necessary to carry out the study. Resources include, but are not limited to, patient biosamples, clinical data, existing cohorts, or other components of current clinical care.
- **Attachment 7: Clinical Impact Statement (one-page limit): Upload as “Impact.pdf”.** Describe how the proposed work will impact ALS clinical care. Specifically highlight how the clinical biomarker development and/or validation effort will:
 - Advance development of biomarkers for disease progression, detecting phenotypic conversion, assessing prognosis, or is relevant to a specific therapeutic (or class of therapeutics), or to a specific type of ALS (such as a particular genetic mutation) with potential to better define subsets.
 - Lead to meaningful improvements in patient care.
 - Create new and outstanding shared resources and/or enhance the value of existing research resources through biosample, data, and information sharing.
 - If applicable, describe how the anticipated outcomes of the proposed study will make an impact in understanding health differences between sexes.

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- If applicable, describe how knowledge, information, products, or technologies gained from the proposed research advance research that is of significance to Service Members, Veterans, and/or their Families.
- **Attachment 8: Population Statement (one-page limit): Upload as “Population.pdf”.** If human subjects will be recruited for patient specimen collection, describe how the research project will reduce disparities among high-risk groups and patients with limited access to clinical care and resources. Discuss how the project could, whether in the short-term or long-term, lead to significant reduction or elimination of the disproportionate effects of ALS on specific populations and reduce health inequity. Provide an anticipated enrollment table(s) with the proposed enrollment distributed on the basis of sex, race, and/or ethnicity. The [Inclusion Enrollment Report](#) form, [Directive on Inclusion of Women and Minorities as Subjects in Clinical Research](#), and [Frequently Asked Questions](#) for the policy may be downloaded from eBRAP. ***Studies utilizing previously collected human biospecimens/datasets or resources that cannot be linked to a specific individual, sex, ethnicity, or race are exempt from this requirement and may submit “N/A” (to indicate not applicable) for this statement. If an application is adding an aim to an existing clinical trial to conduct biosample collection and biomarker analysis, use of the patients enrolled in that trial is expected and the study potentially may not include diverse populations. These applications are exempt from this requirement and may submit N/A for this statement.***
- **Attachment 9: Community Collaboration Plan (no page limit). Required for applications proposing prospective biospecimen or participant enrollment. Upload as “Community.pdf”.** Refer to Section 3.2.2 for more details regarding the Community collaboration requirement. This attachment must be written ***in a manner that will be readily understood by readers without a background in science or medicine.***
 - **Community Collaboration Statement:** Describe the collaborative research approach that will be used (e.g., Lived experience consultant or a partnership with community-based organization or a community advisory board). Detail when and how the approach will be used within the research project, how input will be meaningfully incorporated into the research design, execution, and dissemination, and explain how this best serves the ALS community.
 - Include the name of at least one community partner (person(s) with ALS, family member(s) and/or caregiver(s), representative of a community-based organization or community advisory board) who will provide advice and consultation throughout the planning and implementation of the research project.
 - Describe any training, co-learning, or capacity-building activities that will be provided to both scientific researchers and Community members on collaborative research approaches, decision-making, and equitable participation.
 - **Letters of Community Collaboration (two-page limit per letter):** Provide a letter signed by each Community partner confirming their role and commitment to participate on the research team. The letter should include a mention of why the qualifications and background of the individual will benefit the proposed research project. If a community-based organization/advisory board will be engaged, the letter of commitment should be signed by BOTH the organization point of contact participating and the organization’s leadership endorsing the collaboration.

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- **Attachment 10: Progression Plan (three-page limit): Upload as “Progression.pdf”.** All applicants should contemplate and provide a plan outlining a practical trajectory to transition the research to full clinical implementation, and how this will ultimately translate to benefits for the intended recipients. Applicants should identify what are **the next immediate logical steps following the period of performance** and consider how those steps would be successfully achieved.
 - Describe the **immediate next logical step** proposed to progress the intervention to the next phase of development (clinical trials, commercialization, and/or delivery to the civilian or military market) after successful completion of the award. Include:
 - The timeline needed, with defined milestones, for that next step. If this step is immediately executable for clinical use, describe what is needed next to implement. If another study is required, describe why this additional study is needed and whether that will bring the outcomes to a stage ready to execute and implement.
 - Describe the scientific, technical, and/or regulatory requirements needed to advance the research findings. Include steps necessary for regulatory approval, as applicable.
 - Describe collaborations and other resources that will be used to help progress the continuity of research to the next stage of development or clinical implementation (e.g., clinical partners, commercial partners, manufacturing partners, clinical practice guideline development/execution committees, training providers/resources). Include considerations of intellectual property, ownership rights, licensing, and commercialization plans, as applicable here. Applicants are encouraged to work with their Technology Transfer Office (or equivalent).
 - **Describe how feedback from the ALS community will be integrated** into the progression of this research and continued development of the intervention.
- **Attachment 11: Data and Research Resources Sharing Plan: Upload as “Resources.pdf”.** Describe how data and resources generated during the performance of the project will be shared with the research community. Include plans for making raw data available in existing, publicly available, curated ALS repositories/data platforms or other resources with relevant repository parameters and mechanisms for broad access. A list of suitable [resources](#) can be found on the ALSRP web page. Detail the organizational and technical capabilities sufficient to share project data in a timely manner. Refer to the General Application Instructions, Appendix 2, Section K, for more information about the CDMRP expectations for making data and research resources publicly available. The government reserves the right to identify repositories for submission of data for archive. Any costs associated with submission will be addressed during award negotiations. Note that this document may be used in programmatic review deliberations.
- **Attachment 12: Representations (Grants.gov submissions only): Upload as “RequiredReps.pdf”.** All extramural applicants must complete and submit the [“Required Representations”](#) document that is available on eBRAP. For more information, see the General Application Instructions, Appendix 8, Section B, Representations.
- **Attachment 13: Suggested Intragovernmental/Intramural Budget Form (if applicable): Upload as “IGBudget.pdf”.** If an [intramural DOD 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 that is

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available for download on eBRAP. Refer to the General Application Instructions, Section V.B.(c), for instructions and considerations.

(c) Research & Related Personal Data: For detailed instructions for Grants.gov submissions, refer to the General Application Instructions, Section IV.C.(a); and for eBRAP submissions, refer to the General Application Instructions, Section V.B.(a).

(d) Research & Related Senior/Key Person Profile (Expanded): Complete a Profile for each person who will contribute in a substantive, meaningful way to the scientific development or execution of the proposed research project. A biographical sketch and full description of each PI and senior/key person's current/pending support information must be attached to the individual's profile in the Attach Biographical Sketch and Attach Current & Pending Support fields, respectively.

- **Biographical Sketch:** Upload as "Biosketch_LastName.pdf".

The CDMRP staff and reviewers use biosketches to evaluate whether research teams are equipped with the expertise necessary to carry out the proposed research.

Biosketches must conform to the federal-wide Biographical Sketch Common Form. To prepare their biosketch attachments, applicants may use the instructions provided in the General Application Instructions, Section IV.C.(b), for Grants.gov submissions; or General Application Instructions, Section V.B.(b), for eBRAP submissions; or may use a pdf form created in [SciENCv](#) for the National Institutes of Health (NIH) or the U.S. National Science Foundation (NSF).

- **Current/Pending Support:** Upload as "Support_LastName.pdf".

Current and pending (other) support information are used to assess the capacity or any [conflicts of commitment](#) that may impact the ability of the individual to carry out the research effort as proposed. The information also helps to assess any potential scientific and budgetary overlap/duplication with the project being proposed.

Current and pending support documentation must conform to the federal wide format. To prepare their Current and Pending Support form, applicants may use the instructions provided in the General Application Instructions, Section IV.C.(b), for Grants.gov submissions; or General Application Instructions, Section V.B.(b), for eBRAP submissions; or may use a pdf form created in [SciENCv](#) for NIH or NSF.

(e) Research & Related Budget: For detailed instructions for Grants.gov submissions, refer to the General Application Instructions, Section IV.C.(c); and for eBRAP submissions, refer to the General Application Instructions, Section V.B.(c).

- **Budget Justification (no page limit):** For instructions for Grants.gov submissions, refer to the General Application Instructions, Section IV.C.(c), Section L; for eBRAP submissions, refer to General Application Instructions, Section V.B.(c), Budget Justification Instructions.

(f) Project/Performance Site Location(s) Form: For detailed instructions for Grants.gov submissions, refer to the General Application Instructions, Section IV.C.(d); and for eBRAP submissions, refer to the General Application Instructions, Section V.B.(d).

(g) Research & Related Subaward Budget Attachment(s) Form (if applicable, Grants.gov Submissions only): Refer to the General Application Instructions, Section IV.C.(e), for detailed information.

- **Extramural Subaward:** Complete the Research & Related Subaward Budget Form and upload it through Grants.gov.

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- **Intramural DOD Subaward:** Complete a separate “[Suggested Intragovernmental/Intramural Budget Form](#)” for each intramural DOD subaward. Combine them into a single document, then upload the file to Grants.gov as an attachment named “IGBudget.pdf”.

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 HT942525ALSRPCOBA from [Grants.gov](#) or [eBRAP](#), depending on which submission portal will be used.

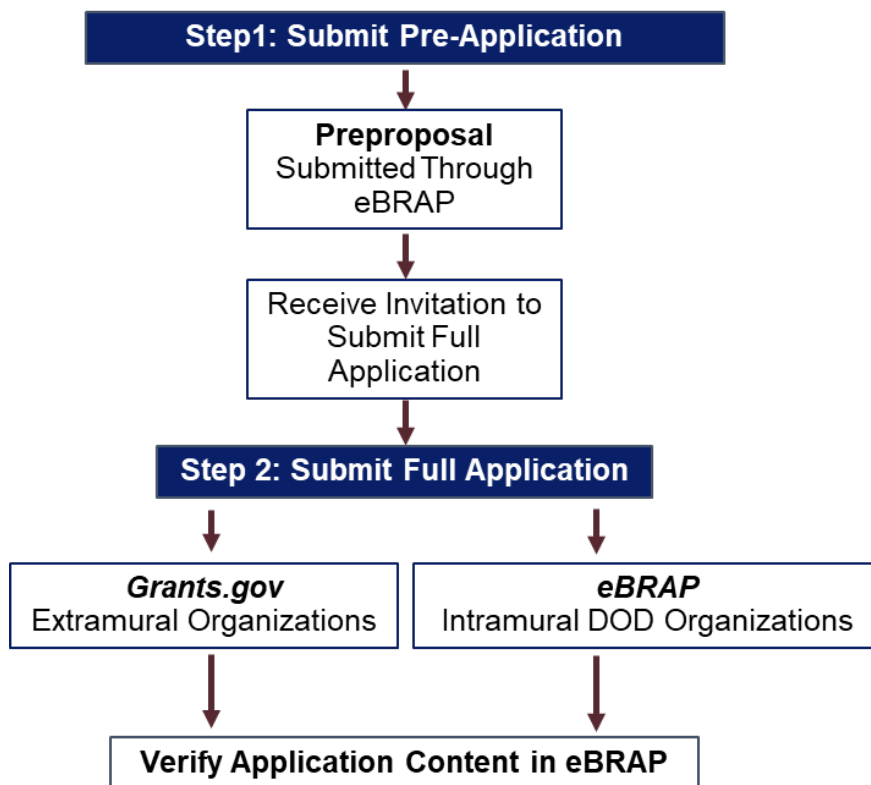
5.2. Unique Entity Identifier and System for Award Management

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. More information regarding SAM registration can be found in the General Application Instructions, Section IV.A.

5.3. Submission Instructions

The CDMRP uses two portal systems to accept pre- and full application submissions.

Application Submission Workflow



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5.3.1. Pre-Application Submission

All pre-application components must be submitted by the PI through eBRAP.

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), 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. If any changes need to be made, the applicant should contact the eBRAP Help Desk at help@eBRAP.org or 301-682-5507 prior to the application submission deadline.

Refer to the General Application Instructions, Section III.A, for considerations and detailed instructions regarding pre-application submission.

5.3.2. Full Application Submission

Grants.gov Submissions: Full applications from extramural organizations *must* be submitted through the Grants.gov Workspace. Refer to the General Application Instructions, Section IV, for considerations and detailed instructions regarding Grants.gov submissions.

eBRAP Submissions: Only intramural DOD organizations may submit full applications through eBRAP. Full applications from extramural organizations, including non-DOD federal organizations, received through eBRAP will be withdrawn. Refer to the General Application Instructions, Section V, for considerations and detailed instructions regarding eBRAP submissions.

5.3.3. Applicant Verification of Full Application Submission in eBRAP

Independent of 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 into eBRAP to review, modify and verify the full application submission. Verification is strongly recommended but not required. eBRAP will validate full application files against the specific program announcement requirements, and discrepancies will be noted in the “Full Application Files” tab in eBRAP. However, eBRAP does not confirm the accuracy of file content. It is the applicant’s responsibility to review all application components and ensure the proper ordering as specified in the program announcement. ***The Project Narrative and Research & Related Budget Form cannot be changed after the application submission deadline. If either the Project Narrative or the budget fails eBRAP validation or needs to be modified, an updated full application package must be submitted through the appropriate portal prior to the full application submission deadline.*** Other application components, including subaward budget(s) and subaward budget justification(s), may be changed until the end of the [application verification period](#). 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

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application rejection. ***The USAMRAA cannot make allowances/exceptions for submission problems encountered by the applicant.***

All submission dates and times are indicated in [Section 1, Basic Information](#) above.

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 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 full position 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. Refer to the General Application Instructions, Appendix 7, Section B.

Members of the FY25 ALSRP Programmatic Panel should 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 [FY25 ALSRP 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

To determine the technical merits of the pre-application and the relevance to the mission of the Defense Health Program and the ALSRP, pre-applications will be screened based on the following criteria:

- **Biomarker Development:** How well the development and/or validation of clinical outcomes and biomarkers to enrich clinical trials is described. How well the biomarker category and intended COU in ALS therapy development, including regulatory considerations for use in ALS clinical trials or clinical practice, are described. How well the scientific rationale including statistical considerations supports the project objectives or hypothesis, specific aims, and feasibility. Whether the required samples, data, or other resources exist or are feasible to obtain from an existing cohort.
- **Data Sharing:** Whether plans to make new samples, data sets, novel tools, and/or analyses broadly available for use by others, such as through deposition in existing, publicly available, curated ALS repositories are described.
- **Clinical Impact in the Intended Population:** To what degree the proposed study will advance the development and/or validation of biomarkers for disease progression, detecting phenotypic conversion, assessing prognosis, or is relevant to a specific therapeutic (or class of therapeutics), or to a specific type of ALS (such as a particular genetic mutation) with

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potential to better define subsets. If outcome measures are the project focus, to what extent the study will lead to meaningful improvements in clinical outcome measures.

6.2.2. Peer Review Criteria

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

- **Scientific Rationale**

- How well the scientific rationale supports the project, and its feasibility as demonstrated by a critical review and analysis of published literature, logical reasoning, and presentation of published or unpublished preliminary data. Strong rationale and feasibility, showing proof of concept and clinical relevance of the proposed research, are critical.

- **Research Strategy and Feasibility**

- How well feasibility of the outcome or biomarker with respect to ALS biology or clinical relevance is described.
- How well the biomarker category and intended COU in ALS therapy development, including regulatory considerations for use in ALS clinical trials or clinical practice, is described and to what extent the intended COU is supported by the study objectives.
- How well the experimental design, methods, statistical plan, and analyses are developed.
- How well statistical considerations to demonstrate that the work is appropriately powered are addressed including appropriate controls and endpoints.
- If applicable, how well access to the ALS patient specimen, patient data, and/or existing cohort is described and to what extent the resource is appropriate for the objective of the study.
- The extent to which data will be collected, handled, and analyzed (including a detailed statistical plan) in a manner consistent with the study objectives.
- If applicable, how well the recruitment process is outlined and the feasibility of statistical outcomes from these additional data.
- How well the potential challenges and alternative strategies are identified.
- How well the application describes future plans and opportunities for eventual validation and independent replication of results.
- 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.

- **Clinical Impact**

- If the project successfully achieves its aims, *to what extent the clinical outcome and/or biomarker development and/or validation has the potential to change clinical care practices and patient management in ALS.*
- Whether the proposed clinical outcome and/or biomarker will lead to meaningful improvements in ALS clinical care and/or clinical trials by better predicting therapeutic response, measuring target engagement, defining ALS subtypes, detecting phenotypic

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conversion, measuring disease progression, or assessing prognosis.

Outcome/biomarker development and data analyses may be relevant to a specific class of therapeutic or to a specific type of ALS (such as a particular genetic mutation) and do not have to broadly apply to all patients.

- How easily this outcome measure could be incorporated into ALS clinical care and/or clinical trials.
- If applicable, how well the short-term or long-term potential for significant reduction or elimination of the disproportionate effects of ALS on specific populations is addressed
- If applicable, to what extent the anticipated outcomes of the proposed study will make an impact in understanding health differences between sexes.

- **Personnel**

- How appropriate the expertise and levels of effort are for successful conduct of the proposed work.
- If applicable, how well the input of the Community Collaboration (e.g., person with ALS, family member and/or caregiver, representative of a community-based organization) is meaningfully integrated and incorporated into the needs assessment, planning, design, execution, analysis, and/or dissemination of the research.

- **Data and Research Resources Sharing Plan**

- How well the plan to share new biosamples, data sets, novel tools, and/or analyses broadly available for use by others, such as through deposition in existing, publicly available, curated ALS repositories is described.
- Whether the proposed plan for data sharing considers existing, publicly available, curated ALS repositories/data platforms, or other resources with relevant repository parameters and mechanisms for broad access to data and samples.
- Whether the plan describes organizational and technical capabilities sufficient to share project data in a timely manner.

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**:

- **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.
- To what extent the quality and level of institutional support are appropriate for the proposed research project.

- **Application Presentation**

- To what extent the writing, clarity, and presentation of the application components influence the review.

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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 the peer reviewers
- Relevance to the priorities of the FY25 ALSRP, as evidenced by the following:
 - Adherence to the intent of the funding opportunity
 - Program portfolio composition
 - Relative impact
 - Appropriateness of the Data and Research Resources Sharing Plan

6.3. Application Review and Selection Process

6.3.1. Pre-Application

Following the pre-application screening, initiating PIs will be notified as to whether they are invited to submit full applications. The estimated date when PIs can expect to receive notification of an invitation to submit a full application is indicated in [Section 1, Basic Information about the Funding Opportunity](#). Feedback (e.g., a critique of the pre-application's strengths and weaknesses) is **not** provided at this stage. Because the invitation to submit a full application is based on the contents of the pre-application, investigators should not change the title or research objectives after the pre-application is submitted.

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 made to the Commanding General, USAMRDC. ***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 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 SAM.

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An applicant organization may review 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 and all associated laws, all fundamental research funded by the DoD 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 [OUSD R&E 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 full application received, the organizational representative(s) and PI will receive email notification when the funding recommendations are posted to eBRAP, typically within six 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 ALSRP 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.

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 USAMRAA 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).***

Intra-DOD 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 DOD 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 DOD 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. For additional information about pre-award costs for Grants.gov submissions, refer to the General Application Instructions, Section I.D, Pre-Award Costs section; and for eBRAP submissions, refer to the General Application Instructions, Section 1.D, Pre-Award Costs section.

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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.

Refer to the General Application Instructions, Appendix 7, for general information regarding administrative requirements.

Refer to the General Application Instructions, Appendix 8, for general information regarding national policy requirements.

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

If there are technical reporting requirement delinquencies for any existing CDMRP awards at the applicant organization, no new awards will be issued 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 and DOD animal and/or human subjects protection requirements and approved by the USAMRDC Office of Human and Animal Research Oversight, prior to implementation. This administrative review requirement is in addition to the local Institutional Animal Care and Use Committee, Institutional Review Board, or Ethics Committee review. Refer to the General Application Instructions, Appendix 6, for additional information.

8.2. Reporting

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

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.

Public Health Service (PHS) Inclusion Enrollment Reporting (Required for research proposing clinical research): 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 SAM about certain civil, criminal, and administrative proceedings that reached final disposition within the most recent 5-year period and that were connected with performance of a federal award. These recipients are required to disclose, semiannually, information about criminal, civil, and administrative proceedings as specified in the applicable Representations (see General Application Instructions, Appendix 8, Section B).

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8.3. Additional Requirements

Changes in PI are not allowed, except under extenuating circumstances that will be evaluated on a case-by-case basis.

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

Refer to the General Application Instructions, Appendix 7, Section H, for general information on organization or PI changes.

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9. Other Information

9.1. Program Announcement and General Application Instructions Versions

Questions related to this program announcement should refer to the program name, the program announcement name, and the program announcement version code CD25_01c. The program announcement numeric version code will match the General Application Instructions version code CD25_01.

9.2. Administrative Actions

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

9.2.1. Rejection

The following will result in administrative rejection of the pre-application:

- Preproposal Narrative is missing.

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

- Project Narrative is missing.
- Budget is missing.
- Submission of an application for which a letter of invitation was not issued.

9.2.2. Modification

- Pages exceeding the specified limits will be removed prior to review for 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 FY25 ALSRP 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.
- Applications that include names of personnel from either of the CDMRP peer or programmatic review companies for which conflicts cannot be adequately mitigated. For FY25, 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.
- Applications from extramural organizations, including non-DOD federal agencies, received through eBRAP.

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- Applications submitted by a federal government organization (including an intramural DOD organization) if: (a) the organization cannot accept and execute the entirety of the requested budget in FY25 funds; and/or (b) the federal government organization 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.
- Inclusion of URLs, with the exception of links in References Cited and Publication and/or Patent Abstract sections.
- 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 invited application proposes a different research project than that described in the pre-application.
- Submission of the same research project to different funding opportunities within the same program and fiscal year.
- The PI does not meet the eligibility criteria.
- A clinical trial is proposed.
- Applications proposing prospective biospecimen or participant enrollment that do not name at least one community partner.

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 USAMRAA Grants Officer for a determination of the final disposition of the application.

9.3. Other Funding Opportunities

The ALSRP is committed to leveraging efforts with other funding organizations to accelerate progress in ALS research. At the time of funding notifications, the ALSRP will inform highly rated, unfunded applicants about opportunities to provide their ALSRP applications and peer review summary statements to non-governmental funders, who will determine the specific criteria for funding consideration.

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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"/>
Letter(s) Confirming Access to Population(s) or ALS Patient Resource(s) (<i>if applicable</i>) – Attachment 6, upload as “Access.pdf”	<input type="checkbox"/>
Clinical Impact Statement – Attachment 7, upload as “Impact.pdf”	<input type="checkbox"/>
Population Statement – Attachment 8 upload as “Population.pdf”	<input type="checkbox"/>
Community Collaboration Plan (<i>if applicable</i>) – Attachment 9, upload as “Community.pdf”	<input type="checkbox"/>
Progression Plan – Attachment 10, upload as “Resources.pdf”	<input type="checkbox"/>
Data and Research Resources Sharing Plan – Attachment 11, upload as “Resources.pdf”	<input type="checkbox"/>
Representations (<i>Grants.gov submissions only</i>) – Attachment 12, upload as “RequiredReps.pdf”	<input type="checkbox"/>
Suggested Intragovernmental/Intramural Budget Form (<i>if applicable</i>) – Attachment 13, upload as “IGBudget.pdf”	<input type="checkbox"/>
Research & Related Personal Data	<input type="checkbox"/>
Research & Related Senior/Key Person Profile (Expanded)	<input type="checkbox"/>
Attach Biographical Sketch for PI and Senior/Key Persons (Biosketch_LastName.pdf)	<input type="checkbox"/>
Attach Current and pending (other) support for PI and Senior/Key Persons (Support_LastName.pdf)	<input type="checkbox"/>
Budget Include budget justification	<input type="checkbox"/>
Project/Performance Site Location(s) Form	<input type="checkbox"/>
Research & Related Subaward Budget Attachment(s) Form (<i>if applicable</i>)	<input type="checkbox"/>
Additional Application Components	
Confidential Letters of Recommendation	<input type="checkbox"/>

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Appendix 2. Acronym List

ALSRP	Amyotrophic Lateral Sclerosis Research Program
BEST	Biomarkers, EndpointS, and Other Tools
CDMRP	Congressionally Directed Medical Research Programs
CFR	Code of Federal Regulations
COBA	Clinical Outcomes and Biomarkers Award
COU	Context of Use
DOD	Department of Defense
DoDGARs	Department of Defense Grant and Agreement Regulations
eBRAP	Electronic Biomedical Research Application Portal
ET	Eastern Time
FAD	Funding Authorization Document
FY	Fiscal Year
M	Million
MIPR	Military Interdepartmental Purchase Request
NINDS	National Institute of Neurological Disorders and Stroke
NSF	U.S. National Science Foundation
OUSD R&E	Office of the Under Secretary of Defense for Research and Engineering
PDF	Portable Document Format
PHS	Public Health Service
PI	Principal Investigator
SAM	System for Award Management
SciENCv	Science Experts Network Curriculum Vitae
SOW	Statement of Work
UEI	Unique Entity Identifier
URL	Uniform Resource Locator
USAMRAA	U.S. Army Medical Research Acquisition Activity
USAMRDC	U.S. Army Medical Research and Development Command
USC	United States Code
VA	U.S. Department of Veterans Affairs

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Appendix 3. DOD and VA Websites

Air Force Office of Scientific Research
<https://www.afrl.af.mil/AFOSR/>

Air Force Research Laboratory
<https://www.afrl.af.mil/>

Armed Forces Radiobiology Research
Institute
<https://afri.usuhs.edu/home>

Combat Casualty Care Research Program
<https://cccrp.health.mil>

Congressionally Directed Medical Research
Programs
<https://cdmrp.health.mil/>

Defense Advanced Research Projects
Agency
<https://www.darpa.mil/>

Defense Health Agency
<https://health.mil/About-MHS/OASDHA/Defense-Health-Agency/>

Defense Suicide Prevention Office
<https://www.dspo.mil/>

Defense Technical Information Center
<https://www.dtic.mil/>

Defense Threat Reduction Agency
<https://www.dtra.mil/>

Military Health System Research Symposium
<https://mhsrs.health.mil/sitepages/home.aspx>

Military Infectious Diseases Research
Program
<https://midrp.health.mil/>

Military Operational Medicine Research
Program
<https://momrp.health.mil/>

Navy Bureau of Medicine and Surgery
<https://www.med.navy.mil/BUMED/>

Naval Health Research Center
<https://www.med.navy.mil/Naval-Medical->

[Research-Command/R-D-Commands/Naval-Health-Research-Center/](https://www.med.navy.mil/Naval-Medical-Research-Command/R-D-Commands/Naval-Health-Research-Center/)

Navy and Marine Corps Force Health
Protection Command
<https://www.med.navy.mil/Navy-and-Marine-Corps-Force-Health-Protection-Command/>

Naval Medical Research Command
<https://www.med.navy.mil/Naval-Medical-Research-Command/>

Office of Naval Research
<https://www.onr.navy.mil/>

Office of the Under Secretary of Defense for
Acquisition & Sustainment
<https://www.acq.osd.mil/>

Telemedicine and Advanced Technology
Research Center
<https://www.tatrc.org/>

Uniformed Services University of the Health
Sciences
<https://www.usuhs.edu>

U.S. Army Aeromedical Research
Laboratory
<https://usaarl.health.mil/>

U.S. Army Combat Capabilities
Development Command
<https://www.army.mil/devcom>

U.S. Army Institute of Surgical Research
<https://usaistr.health.mil/>

U.S. Army Medical Materiel Development
Activity
<https://usammda.health.mil/>

U.S. Army Medical Research and
Development Command
<https://mrhc.health.mil/>

U.S. Army Medical Research Institute of
Infectious Diseases
<https://usamriid.health.mil/>

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U.S. Army Research Institute of

Environmental Medicine

<https://www.t2.army.mil/T2-Laboratories/Designated-Laboratories/US-Army-Research-Institute-of-Environmental-Medicine/>

U.S. Army Research Laboratory

<https://www.arl.army.mil/>

U.S. Army Directorate of Prevention,
Resilience and Readiness

<https://www.armyresilience.army.mil/index.html>

U.S. Department of Defense, Blast Injury

Research Coordinating Office

<https://blastinjuryresearch.health.mil/>

U.S. Department of Veterans Affairs, Office
of Research and Development

<https://www.research.va.gov/>

U.S. Naval Research Laboratory

<https://www.nrl.navy.mil/>

Walter Reed Army Institute of Research

<https://wrair.health.mil/>