



# *Lyme Disease Association, Inc.*

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PO Box 1438, Jackson, New Jersey 08527  
888-366-6611 [Lymeliter@aol.com](mailto:Lymeliter@aol.com) 732-938-7215 (Fax)  
[LymeDiseaseAssociation.org](http://LymeDiseaseAssociation.org)

## Part I

January 2020

Dear Research Grant Applicant,

The Lyme Disease Association (LDA) appreciates your interest and willingness to conduct research that could potentially lead to a cure for chronic Lyme disease or prevention of Lyme disease or research into other tick-borne diseases. The LDA awards grant funds in varying amounts for research projects. In this packet, you will find a research grant application for you to complete to be considered for an extension of funding for an existent project supported by the Lyme Disease Association, Inc. (LDA).

After completing your grant application for extension:

- Please email ([Lymeliter@aol.com](mailto:Lymeliter@aol.com)) a completed, signed, dated copy of the form including this letter initialed.
- **Additionally**, fax (732-938-7215) or mail a completed, signed, initialed, and dated form, all 3 parts including this letter (with all attachments) to LDA PO Box 1438 Jackson, NJ 08527.

Please note that applications for extension will go through an LDA grant review process before approval is given or denied. Monies that are awarded will be given out on a schedule by specific dates decided upon by LDA and dependent upon the nature of the project needs and will include mandatory project reports before each subsequent installment, if applicable, of the monies is paid. Input by applicant in development of payment schedule may be considered by LDA, but final schedule adoption will be the sole province of the LDA.

**All publications, conference presentations, and media announcements including website publication related to the entire project which was initially funded and/or the extension, must acknowledge the LDA as a funder.**

Any changes to your approved grant proposal need to be submitted in writing to LDA and are subject to the approval of the LDA Board of Directors. Please direct questions to [Lymeliter@aol.com](mailto:Lymeliter@aol.com).

The LDA is an all-volunteer non-profit, tax exempt corporation that has raised millions of dollars for Lyme research, prevention, education, and patient support.

If all conditions in the grant application are not met, LDA reserves the right to have all funds paid out by LDA to the applicant/institution returned by him/her to LDA within 90 days of notice of non-compliance by LDA to the applicant, and LDA reserves the right not to award or pay out any additional monies to the applicant/institution. The principal investigator can request approval for any project changes outside of the Application agreement to the LDA.

Sincerely,

*Patricia V. Smith*

Patricia V. Smith, President

Initial here \_\_\_\_\_



**LDA RESEARCH GRANT APPLICATION FOR EXTENSION**

**PART II**

Contact Person:

1. Name & Title:

Address:

Telephone Number with area code (Day):

(Evening):

Fax Number:

E-Mail address:

2. Title of Initial Research Project and submission date of that original project to LDA:

3. Name, Title, Position of Principal Investigator of extension project:

4. Name and address of Research Institution where research will be conducted:

5. Goals and objectives of the extension research pertaining to tick-borne diseases if different than initial project proposal:

6. Timetable for the entire extension project:

7. Timetable for the portion of the extension project to be funded by LDA:

8. Annual cost of the project extension and the amount of that funding requested from LDA:

9. Other sources of funding and ways in which any financial shortfall will be funded:

10. Discuss the following items:

- A. Ways in which the project is consistent with the LDA's goals and objectives, if different than the original project goals.
- B. Method by which the project's effectiveness will be monitored and evaluated.
- C. Explain relationship to existent project.

**Initial here**\_\_\_\_\_



**PART III**

1. Please attach the following:

- A. Description of qualifications of research personnel assigned to project (Curriculum vitae and list of publications of new researchers other than those in original project only).
- B. Detailed description of project, including the experimental design, if different than original grant.
- C. A detailed budget must be provided which includes projected costs of the entire grant extension project. A summary is not acceptable.
- D. One paragraph summary of project which could be released to the public by the LDA.

2. If your project is selected to receive a grant extension the researcher agrees to provide the following:

- A. Project updates on a semiannual basis, and at end of project including funds expended, or as agreed to by the LDA in its discretion.
- B. **Acknowledgment of LDA support** in all publications, conference presentations, and media announcements, including website publications, related to the entire project, which was initially funded, and the extension, regardless of the amount of monies awarded by LDA toward the project.

The Board of Directors of the Lyme Disease Association, Inc. reserves the right to discontinue funding of the research project and/or request return of ALL funds given if the project does not meet the specifications submitted or if the information requested above is not supplied on time as agreed to in the grant application, or if the applicant knowingly supplies false information. Such return of funds to LDA by him/her shall be within 90 days of notice of non-compliance to the applicant by LDA and the request for the funds' return.

Any unused funds must be returned to LDA within 90 days after the funding period has expired. If applicant leaves the Research Institution or is unable to complete the project for any reason, the LDA retains the right in its sole discretion to decide whether or not the project shall continue with LDA funds and/or if the applicant/Institution must return remaining funds to LDA.

By signing, the applicant signifies s/he has the authority to sign this agreement, and the applicant agrees to all terms of this application, as well as those specified in the January 2020 cover letter.

_____ Signature of Grant Applicant	_____ Date	_____ Printed name of Grant Applicant
_____ LDA President (signature)	_____ Date	_____ LDA President (printed)