



MD-CRAB Research Summary Form

Title of Study:

Principal Investigator (Include name, academic title, affiliation and all contact information):

Co-Investigators (Include names and academic titles and affiliations):

Project Director (Include name and complete contact information):

Sponsoring Agency:

Abstract:

If this is a new proposal, please include:

1. Type of Application:
2. Sponsoring/Funding Agency:
3. Due Date of Proposal:
4. Target Population:

If proposal is already submitted, please include:

1. Funding time period:
2. Target Population:

What would you like feedback on or assistance with?

Please add any additional information below that might be of particular interest to the MD-CRAB.