

Notice of Funding Opportunity  
Application due Monday, July 6, 2026










U.S. DEPARTMENT OF  
HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE  
CONTROL AND PREVENTION

National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)  
Division of Parasitic Diseases and Malaria (DPDM)

# Eliminating Parasitic and Neglected Tropical Disease Threats to the United States – Program Support and Research to Reduce Threats to Americans at Home and Abroad

Opportunity number: RFA-CK-26-104

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# Before you begin

If you believe you are a good candidate for this funding opportunity, secure your [SAM.gov](#) and [Grants.gov](#) registrations now. If you are already registered, make sure your registrations are active and up-to-date.

## **SAM.gov registration (this can take several weeks)**

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

[See Step 2: Get Ready to Apply](#)

## **Grants.gov registration (this can take several days)**

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

[See Step 2: Get Ready to Apply](#)

## **Apply by the application due date**

Applications are due by 11:59 p.m. Eastern Time on Monday, July 6, 2026.



To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.



# Step 1:

# Review the Opportunity

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# Basic information

## Centers for Disease Control and Prevention

National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)

Division of Parasitic Diseases and Malaria (DPDM)

Helping eliminate parasitic and neglected tropical disease threats to Americans globally through operational research and evaluations.

## Summary

The purpose of this notice of funding opportunity (NOFO) is to expand the network of institutes working with CDC to help eliminate or control non-malaria parasitic threats and neglected tropical diseases (NTDs). This NOFO will focus on threats and diseases that may affect Americans at home or abroad or whose elimination or control would serve other U.S. priorities.

This program will also support research that will provide tools and information to improve NTD and parasitic disease program activities. The program will also integrate evaluation and surveillance activities for multiple NTDs and other parasitic diseases.

## Funding details

**Funding type:** Cooperative agreement

**Expected awards:** 2

The number of awards is subject to available funds and program priorities.

**Period of performance:** 5 years in 12-month budget periods

**Application type:** New

**Expected total program funding over the performance period:** \$10,000,000

**Expected total program funding per budget period:** \$2,000,000

**Expected funding per applicant per budget period:** \$1,000,000

**Maximum award amount per budget period:** \$1,000,000

**Minimum award amount per budget period:** \$500,000



Have questions?  
See [Contacts and Support](#).

## Key facts

**Opportunity name:**  
Eliminating Parasitic and Neglected Tropical Disease Threats to the United States – Program Support and Research to Reduce Threats to Americans at Home and Abroad

**Opportunity number:**  
RFA-CK-26-104

**Activity code:** U01

**Assistance listing:** 93.326

**NOFO version:** Original

## Key dates

**Application submission deadline:** Monday, July 6, 2026

**Required letter of intent deadline:** June 18, 2026

**Expected scientific review date:** July 31, 2026

**Expected secondary review date:** August 7, 2026

**Expected award date:** September 29, 2026

**Expected start date:** September 30, 2026

**Expiration date:** August 5, 2026

See [Submit Your Application](#) for other submission requirements and deadlines that may apply to this NOFO.

# Eligibility

## Eligible applicants

Only these types of organizations may apply.

- State governments.
- County governments.
- City or township governments.
- Special district governments.
- Independent school districts.
- Public and state-controlled institutions of higher education.
- Native American tribal governments (federally recognized).
- Public housing authorities and Indian housing authorities.
- Native American tribal organizations, other than federally recognized tribal governments.
- Nonprofits having a 501(c)(3) status, other than institutions of higher education.
- Nonprofits without 501(c)(3) status, other than institutions of higher education.
- Private institutions of higher education.
- For-profit organizations other than small businesses.
- Foreign organizations.
- Bona fide agents applying on behalf of state, territorial, local, and tribal government organizations. **Note:** Bona fide agents must submit documentation that demonstrates their arrangement with the eligible applicant. See the [other attachments form](#).

## Responsiveness criteria

We will review your application to make sure it meets these requirements.

These are the basic requirements you must meet to move forward in the competition. We won't consider an application that:

- Is from an organization that doesn't meet all eligibility criteria. See requirements in [Eligibility](#).
- Is submitted after the [application deadline](#).
- Has a budget exceeding \$1,000,000 for the first year of the project. See [funding details](#).

- Includes no countries or U.S. territory in the geographic area with endemic NTDs or parasitic diseases for the proposed project activities. Please see the “[Neglected Tropical Diseases - Our World in Data.](#)”
- Lacks the letter of support from the relevant Ministry of Health in each proposed country to document agreement to collaborate and to verify previous or ongoing partnerships. See the [research plan section](#) for information about how to provide these.
- Exceeds the page limit of 12 pages for your research strategy section. See more information on the [research strategy in the research plan section](#) of this NOFO.

See the [application checklist](#) to understand which elements of your application are part of the responsiveness criteria.

## Application limits

You must follow these limits on the number of applications your organization can submit.

You may submit only one application per institution. This is normally identified by having a Unique Entity Identifier (UEI) number.

## Qualifications for principal investigator or project director

We invite anyone who has the skills, knowledge, and resources needed to carry out the proposed research as a project director or principal investigator (PD/PI) to work with their organization or institution to apply.

As PD/PI, you must work with your institutional officials to register with the eRA Commons or ensure that your existing eRA Commons account is affiliated with your institution. Your registration must be completed and active before the application due date. We encourage you to start the registration process at least four weeks before the application due date.

The application should demonstrate that the PD/PI:

- Has experience that is relevant to project goals and objectives.
- Has accomplishments in advancing NTD/parasitic disease prevention.
- Has a track record of collaboration with investigators from multiple organizations.
- Has previous experience working with CDC or other federal agencies on projects related to NTDs/parasitic diseases.

- Has recent or current experience working with ministries of health in NTD/parasitic disease endemic countries or US territories.

## Cost sharing and matching funds

This program has no cost-sharing requirement, meaning you do not need to contribute to the costs of this project.

If you choose to include cost-sharing funds, we won't consider it during review. If you receive an award, we will include your voluntary commitment in the award, and you must report on the funds.

### Post-award requirements

Before you apply, make sure you understand the requirements that come with an award.

See [Step 6: Learn What Happens After Award](#) for information on regulations that apply, reporting, and more.

# Agency priorities

## Required alignment with CDC priorities

The recipient of this award must implement any funds awarded under this NOFO to effectuate program goals or agency priorities in accordance with the [Centers for Disease Control and Prevention \(CDC\) Priorities](#) when authorized (for a full description of the CDC Priorities, please follow the provided hyperlink).

Funded activities must:

- Align with CDC's core priorities by demonstrating a commitment to gold-standard science, transparency, and evidence-based practices.
- Support CDC's mission to protect Americans from infectious and chronic diseases, strengthen public health systems, and advance innovation in health data and infrastructure.
- Contribute to rapid, science-driven responses to health threats, promote global health leadership, and adhere to principles of integrity, accountability, and compliance with applicable laws and federal priorities.

Consistent with CDC's values, in carrying out any project funded under this NOFO, the recipient must adhere to the following principles where consistent with the authority and scope of the award and its activities:

- **A commitment to gold-standard science and ensuring trust, transparency, and credibility:** To build trust and improve CDC's ability to lead during health crises, CDC will increase transparency, be more accountable, and follow strict, gold-standard scientific practices that are open, unbiased, and based on clear evidence.
- **A commitment to global leadership:** With staff in 63 countries and supporting 20 more, CDC's Global Health Center:
  - Works to prevent disease and advance emergency response.
  - Detect health threats early, send response teams, train health workers, and provide personal protective equipment, vaccines, and medicines.
  - Test disease samples from around the world to prepare for flu and other serious outbreaks.
  - Has strengthened systems to better protect people at home and abroad after the COVID-19 outbreak.

- **A commitment to ensuring rapid, evidence-based responses to crises:** During public health emergencies, ensuring rapid, science-driven responses is critical to minimizing harm, maintaining public trust, and restoring stability. To meet this goal, CDC must continue to strengthen its emergency response systems by:
  - Streamlining internal processes.
  - Improving risk communication strategies.
  - Ensuring that laboratory capacity is fully equipped and tested—capable of rapidly developing and deploying scalable diagnostics during crises.
  - Embedding structures for real-time learning, independent after-action reviews, and the application of lessons learned will ensure that each crisis response is smarter, faster, and more effective than the last.
- **A commitment to vaccine safety and efficacy research:** CDC will apply “gold-standard” science to all of its vaccine safety and effectiveness research. It will make vaccine data, research methods, and related datasets publicly available through simple data use agreements to improve transparency, accountability, and trust.
- **A commitment to advancing our understanding of the causes of autism spectrum disorder (ASD), neurodevelopmental disorders (NDDs), and chronic disease:** CDC conducts research and works with partners to better understand the causes of autism spectrum disorder, neurodevelopmental disorders, and chronic diseases. It will use new and existing data to study the rise in these conditions, including the increase in autism diagnoses from 1 in 150 to nearly 1 in 31 over the past 25 years.
- **A commitment to modernizing public health infrastructure and enhancing our approach to health data:** CDC will modernize public health infrastructure to create a faster, more efficient health system that can detect and respond to outbreaks in real time. This effort includes:
  - Replacing data silos with integrated systems.
  - Using advanced technology.
  - Strengthening partnerships with states to ensure shared responsibility and strong local health data systems.
  - Emphasizing collaboration across federal and state partners, resilient and adaptable systems, and accountability for funded programs to ensure they align with these priorities and federal requirements.

- **Conflicts of interest:** CDC will not support funding programs with conflicts of interest and ensure its work is based on transparent, unbiased science.
- **Immigration:** CDC funds will not be used to support or encourage illegal immigration, consistent with federal law.
- **Protecting life and the family:** CDC funds will not be used to support elective abortions, consistent with the Hyde Amendment, and will promote maternal health, the dignity of life, and strong families.
- **Ending disorder on America's streets:** CDC will prioritize evidence-based programs that reduce homelessness, drug use, and public disorder. It will support comprehensive services for people with serious mental illness and substance use disorder. CDC will not support housing first strategies, harm-reduction or safe consumption sites, or related activities. To the extent allowable by federal law, CDC intends to give priority to grantees in States and municipalities that have laws and policies that support and enforce CDC's priorities.
- **[Gender ideology and protecting children:](#)** CDC will not fund medical interventions for minors seeking gender transition and will define sex based on biological criteria.
- **DEI:** CDC will not support DEI initiatives based on group identity and focus on merit-based, evidence-driven approaches to improve health outcomes.
- **Parental rights:** CDC will support policies that protect parental authority, promote transparency, and give parents greater control over their children's education.

The recipient must demonstrate ongoing compliance with the full description and listing of CDC values and priorities, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation.

Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other enforcement actions consistent with federal grant regulations found at 2 CFR Part 200 and the terms and conditions of this award. The full CDC Priorities Statement can be found here: [Centers for Disease Control and Prevention \(CDC\) Priorities](#).

# Program description

## Background

More than 200,000 people die from neglected tropical diseases (NTDs) every year, and millions have disabilities caused by NTDs. An estimated 1.5 billion people need intervention to treat or prevent at least one NTD. Other parasitic threats also impact human health in the U.S. and abroad. The economic costs of NTDs are significant, reaching billions of dollars in direct costs and reduced productivity.

CDC helps countries coordinate, implement, and evaluate parasitic and NTD programs as part of the global control and elimination of these diseases. This work helps keep Americans safe at home and abroad and strengthens economic resilience. CDC works with country NTD programs and international partners to achieve the global NTD targets, focusing on speeding up programmatic actions and intensifying cross-cutting approaches to control and eliminate NTDs. This work also involves operational research that addresses critical implementation challenges in NTD and parasitic disease control and elimination programs. This NOFO is intended to expand CDC's network of collaborating entities, for both research with and technical assistance to countries endemic for NTDs and other parasitic threats. This NOFO will focus on research synthesis and operational research aimed at controlling and eliminating selected NTDs and other parasitic threats, as well as integrating activities that cross health sectors.

One key strategy for controlling and eliminating these diseases is ensuring access to effective preventive chemotherapy for NTDs that would respond to community mass drug administration (MDA). Other key strategies for controlling and eliminating NTDs and other parasitic diseases include:

- Vector control tools for diseases spread by insects or ticks.
- Timely and accurate diagnosis and treatment of infections.
- Access to water, sanitation, and hygiene (WASH).

Coordinated global efforts and private-public partnerships have enabled consistent donations of medicines and vector control tools, which has helped make substantial progress toward eliminating several NTDs. Approximately 1 billion people annually receive MDA for at least one of the NTDs that can be controlled or eliminated with preventive chemotherapy. As a result of increasing use of MDA through 2025, an estimated 350 million people in 41 countries previously at risk of NTDs no longer require yearly treatment.

As NTD elimination and control programs have matured, we now need new tools and strategies to:

- Ensure that they reach and treat all groups who remain at risk of NTDs.
- Reach elimination targets so that MDA is no longer necessary.
- Rapidly and efficiently detect any resurgence of these diseases after treatment is stopped.

## Related work

This NOFO builds on CDC's previous support of global and domestic partnerships to eliminate and control NTDs and other parasitic diseases. CDC has been a leader in the fight to eliminate and control NTDs around the globe and plays a key role in ongoing research to demonstrate that community MDA can interrupt transmission of endemic NTDs. CDC's discovery and operational research help develop, validate, and increase the use of novel laboratory tools, field-friendly diagnostic formats and techniques, and epidemiologic methods that NTD elimination programs need in order to achieve, document, and maintain health impact.

## Purpose

The purpose of this NOFO is to advance strategic and applied research to help control and eliminate NTDs and other parasitic diseases in endemic countries. CDC will fund critical implementation research projects and evaluation activities that inform threat control and elimination activities. This includes program monitoring and evaluation (M&E) and surveillance.

Public health impacts:

- First, these evaluations and studies will provide critical scientific knowledge to guide programs in countries where NTDs and other parasitic diseases are endemic.
- Second, these activities will identify, use, and evaluate evidence-based intervention strategies to reduce morbidity and mortality due to NTDs and other parasitic diseases.
- Third, this work will be used to improve care in the U.S. or reduce the risk of infection of U.S. travelers and military personnel by reducing local transmission.

CDC priorities:

- Ensure state-of-the-art laboratories in science, quality, and safety (CDC core capability).

- Respond quickly to outbreaks at their source (CDC core capability).
- Build on strong global capacity and domestic preparedness (CDC core capability).

## Approach

This NOFO will focus on research synthesis and operational research aimed at controlling and eliminating selected NTDs and other parasitic diseases, as well as approaches to integrated activities that cross health sectors. The project should address an important problem or critical barrier that is limiting progress in NTD/parasitic disease prevention. Applications should clearly explain how achieving the project aims will enhance scientific knowledge, technical capability, or public health outcomes. The application should detail how successful completion of the aims will transform the concepts, methods, technologies, treatments, services, or preventive interventions that drive NTD/parasitic disease prevention.

You'll address in your application how to conduct strategic and applied research to:

- Inform NTD/parasitic disease control and elimination activities, including program impact M&E, in NTD/parasitic disease endemic countries and US territories.
- Provide tools and information to improve NTD/parasitic disease program activities.
- Support integration of evaluation and surveillance activities for multiple parasitic diseases and NTDs, where possible.

The overall strategy, methodology, and analyses should be well-reasoned and appropriate to accomplish the aims of the project. The application should present potential problems, alternative strategies, and benchmarks for success. The research project plans should anticipate managing risky aspects of the project.

The scientific environment where the work will be done should improve the chances of program success. The institutional support, equipment, and other physical resources available to the investigators should be adequate to execute the project. The application should describe how the project will benefit from the unique features of the scientific environment, subject populations, or collaborative arrangements for the proposed project. Plans for sharing findings with the community should be outlined in the application.

The approach should be innovative by challenging and seeking to shift current research or clinical practice paradigms by using novel theoretical

concepts, approaches or methodologies, instrumentation, or interventions. The proposed project should be novel to one field of research or novel in a broader context of NTD/parasitic disease prevention. The application should propose to refine, improve, or newly apply theoretical concepts, approaches or methodologies, instrumentation, or interventions.

## Objectives and outcomes

This section includes the outcomes we expect you to report progress on and achieve within the period of performance if you receive funding.

Specific objectives you will need to address in your application include:

- Collaborating with CDC and the relevant Ministry of Health.
- Developing surveillance and diagnostic program tools to help control and eliminate NTD/parasitic diseases and guide these programs.
- Strengthening in-country capacity for monitoring and evaluation, laboratory work, and data use to achieve and sustain NTD/parasitic disease program goals.

You should also conduct at least two of these activities in one or more NTD/parasitic disease endemic countries or U.S. territories:

- Conduct field studies to determine indicators of transmission and stopping points for MDA.
- Evaluate the reliability and feasibility of new diagnostic tests for NTDs/parasitic diseases, and/or collect specimens with known and well-documented demographic and epidemiological information that can be used to develop new tests.
- Develop or validate strategies that can be used along with MDA to speed up progress toward eliminating and controlling NTDs/parasitic diseases.
  - One example is community-directed control of black flies that transmit onchocerciasis, through cutting and clearing trailing vegetation along fast-flowing rivers and streams.
- Develop enhanced or novel strategies to carry out MDA in urban areas, border areas, conflict areas, mobile populations, and other hard-to-reach or hard-to-treat populations. Also assess the impact of these strategies.
  - One example is onchocerciasis-endemic populations with co-endemic loiasis.
- Evaluate surveillance strategies for NTDs/parasitic diseases after treatment, validation, and/or verification. Include strategies to detect

potential hot spots. Your approaches to surveillance should be integrated.

- Establish sampling strategies and rules to guide program decisions when using new NTD/parasitic diagnostic tests.
- Develop laboratory and/or epidemiologic methods to evaluate the impact of vector control programs. Optimize vector control, surveillance, and monitoring strategies for program use.
- Strengthen laboratory capacity and quality management in endemic country laboratories and strengthen data management and visualization capacity.
- Develop and assess NTD morbidity markers and monitor effects of treatment on morbidity.
- Evaluate water, sanitation, and hygiene (WASH) interventions on MDA effectiveness for NTDs.

## Collaborations

You are required to collaborate with health ministries in countries or US territories where you plan to work.

You will need to include a letter of support from the relevant health ministries or other collaborators to verify previous and ongoing partnerships. See the [research plan section of this NOFO](#).

You may also include documentation of any memoranda of understanding/ memoranda of agreement (MOU/MOA) in the appendix to the application. See [more information about the appendix](#).

## Evaluation and performance measurement

Your application should include measurable goals and aims based on a five-year research period of performance. You must establish specific, measurable, achievable, realistic and time-phased (SMART) project objectives for each activity described in your project plan. You will also need to describe how you will develop and use project performance measures based on the program objectives.

## Paperwork Reduction Act

Any activities involving information collection from 10 or more individuals or organizations may require the Paperwork Reduction Act (PRA) approval. The PRA requires review and approval of the information collection by the White House Office of Management and Budget.

To determine if a proposed activity requires PRA approval, contact your scientific and research contact. Collections include items like surveys and questionnaires. If you have collections requiring PRA approval, CDC is responsible for working with OMB to gain the approval.

For more information about CDC's requirements under PRA see [CDC Paperwork Reduction Act Compliance](#).

## Translation plan

In your application, specify how you will integrate the translation activities into the project plan:

- How these scientific findings will be used to inform public health policies or practices of local governments and other stakeholders.
- How the project improves or affects the translation of study findings into policy or practice.
- How the research findings help promote or speed up sharing and carrying out improvements in public health programs and practices.
- How the findings advance or guide future scientific efforts or related activities.
- How the research in this NOFO improves health outcomes.

## Funding policies and limitations

### Changes in HHS regulations

As of October 1, 2025, HHS has adopted [2 CFR 200](#), with some exceptions included in [2 CFR 300](#). These regulations replace those in 45 CFR 75. You can find details in HHS Summary of Regulatory Changes, which is posted in the Grants.gov Related Documents tab for this opportunity.

### General guidance

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate; racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will

not receive funding to the extent permitted by law and applicable court orders.

- You may use funds only for reasonable program purposes consistent with the award, its terms and conditions, and federal laws and regulations that apply to the award. If you have questions about these purposes, [ask the grants management specialist](#).
- Your budget is arranged in eight categories: salaries and wages, fringe benefits, travel, equipment, supplies, contractual, other (includes consultant costs), and indirect costs.
- Support beyond the first budget year will depend on:
  - Appropriation of funds.
  - Satisfactory progress in meeting your project's objectives.
  - A decision that continued funding is in the government's best interest.
- Generally, you may not use funds to purchase furniture. Clearly identify and justify any such proposed spending in the budget.
- If we receive more funding for this program, we will consider:
  - Funding more applicants.
  - Extending the period of performance.
  - Awarding supplemental funding.

## Unallowable costs

You may not use funds for:

- Clinical care, except as allowed by law.
- Pre-award costs, unless we give you prior written approval.
- Other than for normal and recognized executive-legislative relationships:
  - Publicity or propaganda purposes, including preparing, distributing, or using any material designed to support or defeat the enactment of legislation before any legislative body.
  - The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order proposed or pending before any legislative body.

See [Anti-Lobbying Restrictions for CDC Recipients \[PDF\]](#).

For guidance on some types of costs that we restrict or do not allow, see 2 CFR 200.420, [Considerations for Selected Items of Cost](#).

## Indirect costs

Indirect costs are those shared across multiple projects and not easily separated. Learn more at [CDC Budget Preparation Guidelines \[PDF\]](#).

To charge indirect costs you can select one of two methods:

**Method 1 — Approved rate.** If you currently have an indirect cost rate approved by your cognizant federal agency, you may use that rate.

Enclose a [copy of the current approved rate agreement](#) in your Other Attachments form.

**Method 2 — *De minimis* rate.** If you do not have a current negotiated indirect cost rate, you may elect to charge a *de minimis* rate (see [2 CFR 200.414\(f\)](#)). This rate is 15% of modified total direct costs (MTDC). See the definition of MTDC ([2 CFR 200.1](#)). You can use this rate indefinitely.

For foreign awards, recipients may charge indirect costs on awards to foreign organizations and foreign public entities performed fully outside of the U.S. and its territories to support the costs of complying with federal requirements. This rate is fixed at 8% of MTDC, excluding tuition and related fees, direct expenditures for equipment, and subawards over \$50,000. Negotiated indirect costs may be paid to the American University, Beirut, and the World Health Organization.

## Other indirect cost policies

As described in [2 CFR 200.403\(d\)](#), you must consistently charge items as either indirect or direct costs and may not double charge.

Indirect costs may include the cost of collecting, managing, sharing, and preserving data.

## Salary rate limitation

The salary rate limitation in the current appropriations act applies to this program. As of January 2026, the salary rate limitation is \$228,000. We update this limitation when it changes.

## Program income

If you earn any money from your award-supported project activities (known as program income), you must use it for the purposes and under the conditions of the award. Find more about program income at [2 CFR 200.307](#).

## Expanded authority

For more information on expanded authority and pre-award costs, see the [HHS Grants Policy Statement](#) and speak to the [grants management contact](#).

Pre-award costs may be allowable as an expanded authority, but only if we authorize the costs.

## Public health data

We require that awards include the needed costs and methods to share public health data. You may include the reasonable cost of sharing or archiving public health data as part of your requested budget for first-time or continuation awards. For more information, see [Data Management and Access](#).

## Human subjects

We will restrict funds related to conducting research involving human subjects until the appropriate assurances and Institutional Review Board (IRB) approvals are in place. To lift the restrictions, we require copies of all current local IRB approval letters, local IRB-approved protocols, and CDC IRB approval letters, when applicable.

If the proposed research project involves more than one institution and will be conducted in the United States, we expect you to:

- Use a single Institutional Review Board (sIRB) to conduct the required ethical review.
- Include a single IRB plan in your research plan and PHS Human Subjects and Clinical Trials Information form, unless either of the following is true:
  - Review by an sIRB would be prohibited by a federal, tribal, or state law, regulation, or policy.
  - You provide a compelling justification based on ethical or human subject protection issues or other well-justified reasons.

Do not duplicate information in the research plan form and the PHS Human Subjects and Clinical Trials Information form.

In your research plan, discuss the overall strategy, methodology, and analyses of your proposed research. Use the PHS Human Subjects and Clinical Trials Information form to provide detailed information for human subjects studies and clinical trials.

We will review and approve exceptions in accordance with [45 CFR part 46](#) and, as applicable, [21 CFR part 50](#) and [21 CFR part 56](#), or we may place a restriction on the award.

Note: The sIRB requirement applies to participating sites in the United States. Foreign sites participating in CDC-funded, cooperative research studies do not need to follow the requirement for sIRB.

For more information, please consult the [scientific and research contact listed for this NOFO](#).

## Statutory authority

Public Health Service Act, Section 301(a), 42 USC 241a; Section 307, 42 USC 242l; and Section 317(k)(2), 42 USC 247b(k)(2).



# Step 2:

## Get Ready to Apply

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# Find the application package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) or [eRA ASSIST](#) and search for opportunity number RFA-CK-26-104. After opening the opportunity, select the “package” tab to see the forms.

We recommend that you select the Subscribe button from the View Grant Opportunity page for this NOFO to get updates.

If you can't use Grants.gov to download application materials or have other technical difficulties, including issues with application submission, [contact Grants.gov](#) for help.

## Get registered

You must be registered in both SAM.gov and Grants.gov to apply. You can review the requirements and get started on developing your application before your registrations are complete.

### SAM.gov

You must have an active account with SAM.gov to apply. SAM.gov registration can take several weeks. Begin that process today.

To register:

- Go to [SAM.gov Entity Registration](#) and select Get Started. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.
- You must agree to the [financial assistance general certifications and representations \[PDF\]](#) specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

## Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#).

## eRA Commons

You must register in [eRA Commons](#). Your senior and key personnel must also register and affiliate their accounts with your organization's account.

Register at least four weeks before the application deadline.

Need help? See [Contacts and Support](#).

## Help applying

For help with the application process and tips for preparing your application, see [How to Apply](#) on our website and the [Research Instructions for NIH and Other PHS Agencies \[PDF\]](#).

If any instructions differ from those in this NOFO, follow the instructions in this NOFO.

For other questions, see [Contacts and Support](#).



# Step 3:

# Build Your Application

## In this step

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# Application checklist

You must follow the [research instructions \[PDF\]](#) to complete your application.

In this section, we also provide NOFO-specific guidance for some forms.

Make sure that you have everything you need to apply:

Form	Required for
<input type="checkbox"/> PHS 398 Research Plan form	All applications.
<input type="checkbox"/> SF-424 (R&R)	All applications.
<input type="checkbox"/> PHS 398 Cover Page Supplement form	All applications.
<input type="checkbox"/> SF-424 (R&R) Other Project Information	All applications.
<input type="checkbox"/> SF-424 (R&R) Project/Performance Site Locations	All applications.
<input type="checkbox"/> SF-424 (R&R) Senior/Key Person Profile	All applications.
<input type="checkbox"/> R&R Budget form or HS 398 Modular Budget form	All applications. <ul style="list-style-type: none"> <li>• Include only one of these forms, not both, in your application.</li> <li>• The modular form is typically used by domestic organizations requesting \$250,000 or less per budget period in direct costs.</li> </ul>
<input type="checkbox"/> R&R Subaward Budget Attachments form	If your application proposes subawards.
<input type="checkbox"/> PHS Human Subjects and Clinical Trials Information	All applications.
<input type="checkbox"/> PHS Assignment Request form	Optional.
<input type="checkbox"/> Other Attachments form	All applications.
<input type="checkbox"/> Report on overlap	If applicable.
<input type="checkbox"/> Bona fide agents documentation	If applicable.
<input type="checkbox"/> Indirect cost agreement	If applicable.

See [submission requirements and deadlines](#) to see if there are other requirements beyond the application itself.

**Important: Public information**

When filling out your SF-424 form, pay attention to Box 15: Descriptive Title of Applicant's Project.

We share what you put there with [USAspending](#). This is where the public goes to learn how the federal government spends their money.

Instead of just a title, insert a short description of your project and what it will do.

[See instructions and examples \[PDF\]](#).

# Application contents and format

You must follow the [research instructions \[PDF\]](#) in the [How to Apply: Application Guide](#) unless this NOFO says otherwise. We strictly enforce these requirements. If you do not follow them, we may delay or not accept your application for review.

See [responsiveness criteria](#) to make sure you meet all requirements.

As you build your application, keep the [review criteria](#) in mind.

## PHS 398 Research Plan form

You will use the PHS 398 Research Plan form to complete your research plan. You will upload each of the following parts of the form as a separate attachment.

Some parts may not be required for your application. We provide guidance here and in the [Application Guide](#).

Follow all instructions beginning on page 80 of the [research instructions \[PDF\]](#). We note additional instructions in this NOFO.

## Introduction

This section only applies to resubmission or revision applications. Do not include this section if you are submitting a new or renewal application.

## Research plan section

To complete this section use the instructions beginning on page 82 of the [research instructions](#). The parts for this section include:

Parts	Required for	Page limit
Specific aims	All applications.	1 page
Research strategy	All applications.	12 pages

- **Specific aims:** State the problem your proposed research will address and how your research will affect public health and improve population health.

- **Research strategy:** Organize your research strategy under three headings: **significance**, **innovation**, and **approach**. Describe your proposed research plan, including staffing and a timeline of planned activities.
  - Include how you will conduct at least two of the activities listed in the [Objectives and outcomes section](#) of the program description.
  - Include the information requested in the [Evaluation and performance measurement section](#) of the program description.
  - Include the information requested in the [Translation plan section](#) of the program description.
  - See the [scientific merit review section](#) for the questions reviewers will consider when reviewing your application.

To complete this section use the instructions beginning on page 86 of the [research instructions \[PDF\]](#). The parts for this section include:

Parts	Required for	Page limit
Vertebrate animals	If you answer “Yes” to the question “Are Vertebrate Animals Used?” on the R.220 - R&R Other Project Information form.	None
Select agent research	If your proposed activities involve the use of select agents at any time during the proposed period of performance.	None
Multiple PI/PD leadership plan	If you designate multiple PD/PIs (on the R.240 - R&R Senior/Key Person Profile (Expanded) form).	None
Consortium and contractual arrangements	If you include any consortiums or contracts in your budget.	None
Letters of Support	All applications.	None
Resource sharing plans	All applications.	None
Other plans	All applications.	None
Authentication of Key Biological and/or Chemical Resources	All applications.	None

## Other plans: Data management plan

For all public health data you plan to collect, a data management plan (DMP) is required. For a definition of “public health data” and other key information, see [Data Management and Access](#) on our website.

Submit your DMP in the Other Plans section of your PHS 398 Research Plan and include:

- The data you will collect or generate and what its sources will be.
- Whether there are reasons why you cannot share data collected or generated under the award with CDC. These could include legal, regulatory, policy, or technical concerns.
- Who can access data and how you will protect it.
- Data standards that explain what documentation released data will have. That documentation should describe collection methods, what the data represent, and data limitations.
- Archival and long-term data preservation plans.
- How you will update the DMP as new information becomes available over the life of the project. You will provide updates to the DMP in annual reports. For more information about CDC’s policy on the DMP, see [Data Management and Access Requirement](#) at CDC’s website.
- Examples of DMPs may be found at the [California Digital Library’s DMP Tool](#) or [U.S. Geological Survey Data Management Plans](#).

## Appendix

We allow only limited appendix materials. Follow all the appendix instructions detailed on page 94 of the [research instructions \[PDF\]](#).

Do not use the appendix to get around page limits. You may attach up to 10 PDF documents in the appendix. Additionally, you can include up to three publications that are not publicly available.

## Budget form

To develop your budget, see [CDC’s Budget Preparation Guidelines \[PDF\]](#).

Be sure to follow the guidance in [funding policies and limitations](#).

The budget can include both direct costs and indirect costs as allowed.

## Other Attachments Form

You will use the Other Attachments form to upload the following attachments.

### Report on overlap

**File name:** Report on overlap

You must provide this attachment only if you have submitted a similar request for a grant, cooperative agreement, or contract to another funding source in the same fiscal year and that request may result in any of the following types of overlap:

#### Programmatic

- They are substantially the same project.
- A specific objective and the project design for accomplishing it are the same or closely related.

#### Budgetary

- You request duplicate or equivalent budget items that are already funded by another source or requested in the other submission.

#### Commitment

- Given all current and potential funding sources, an individual's time commitment exceeds 100%, which is not allowed.
- We will discuss the overlap with you and resolve the issue before award.

### Bona fide agent documentation

**File name:** Bona fide agent

A bona fide agent is an organization eligible to submit an application on behalf of another organization.

If you are applying as a bona fide agent of a state, territorial, tribal, or local government, you must attach a legal, binding agreement from the government as documentation of your status as their agent.

## Indirect cost agreement

**File name:** Indirect cost agreement

If you include indirect costs in your budget using an approved rate, include a copy of your current agreement approved by your [cognizant agency for indirect costs](#) (2 CFR 200.1). If you use the *de minimis* rate, you do not need to submit this attachment.



# Step 4:

# Understand Review, Selection, and Award

## In this step

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# Application review

## Initial review

We will review your application to make sure that it meets the [responsiveness criteria](#). If your application does not meet these criteria, we will not move it to the merit review phase.

**We will not review any pages over the page limit.**

## Scientific merit review

We use a two-level merit review process:

- External scientists with expertise in relevant scientific disciplines and research areas perform the first-level review.
- Internal senior federal scientists with broad scientific and programmatic experience perform the second-level review.

All responsive applications will:

- Be assigned an overall impact/priority score.
- Receive a written critique.

## First level of merit review

Reviewers will consider each of the following review criteria to determine scientific merit and give a separate score for each. An application does not need to be strong in all categories to be judged likely to have major scientific impact. For example, a project that is not innovative may be essential to advance a field.

The reviewers use the following criteria. Overall impact and criterion scores (1-to-9-point scale: 1 = exceptional; 9 = poor).

Reviewers will provide an overall impact score. This score indicates how likely they think it is that the project will have a sustained, powerful influence on the research fields involved. They consider the following scored criteria and additional review criteria.

We will average the eligible reviewers impact scores for each application (calculated to one decimal point) and multiply it by 10 to determine the final overall impact score. The final overall impact score ranges from 10 (high impact) to 90 (low impact).

## Scored criteria

Reviewers will evaluate the five individual criteria listed here (significance, investigators, innovation, approach, and environment) and consider the application's strengths and weaknesses within each criterion. The impact score for the application is not intended to be an average of these scored criteria.

### Significance

- Does the project address an important problem or a critical barrier that is limiting progress in the NTD/parasitic disease prevention?
- Does the application clearly explain how achieving the project aims will enhance scientific knowledge, technical capability, or public health outcomes?
- Does the application detail how successful completion of the aims will transform the concepts, methods, technologies, treatments, services, or preventive interventions that drive NTD/parasitic disease prevention?
- Does the project propose at least two of the activities that reflect the [objectives and outcomes section of the program description](#)?
- Does the proposed project include activities in more than one NTD/parasitic disease endemic country or US territory?
- Does the application focus on at least one parasitic disease?
- Would the results of the proposed activities be important to inform parasitic NTD control and elimination program strategies outside of the country where the work is being performed?
- Would the results of the proposed activities address a significant challenge to parasitic NTD control and elimination in the country?

### Investigators

- Do the PD/PI, collaborators, and research team have relevant, documented experience to support the project goals and objectives?
- Does the application demonstrate an ongoing record of accomplishments and advancement in NTD/parasitic disease prevention?
- Does the application show previous experience working with CDC or other federal agencies on projects related to NTDs/parasitic diseases?
- Does the PD/PI have recent or current experience working with ministries of health in NTD/parasitic disease endemic countries or US territories?

- Does the team demonstrate recent or current experience working on parasitic NTD projects with NTD/parasitic disease endemic countries in collaboration with ministries of health and/or CDC?

## Innovation

- Does the proposed project challenge and seek to shift current research or clinical practice paradigms by using novel theoretical concepts, approaches or methodologies, instrumentation, or interventions?
- Is the proposed project novel to one field of research or novel in a broader context of NTD/parasitic disease prevention?
- Does the application propose to refine, improve, or newly apply theoretical concepts, approaches or methodologies, instrumentation, or interventions?

## Approach

- Is the application open to considering other NTDs and parasitic diseases?
- Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the aims of the project?
- Does the application present potential problems, alternative strategies, and benchmarks for success?
- If the research project is in the early stages of development, is the strategy proposed feasible and will particularly risky aspects be managed?
- If the project involves human subjects or clinical research, are there plans to protect human subjects from research risks? Is the use of human subjects justified in terms of the scientific goals and research strategy proposed?
- Is the project collaborative with investigators from multiple organizations? Does the application show that investigators have complementary and integrated expertise? Are the leadership approaches, governance, and organizational structures outlined appropriate for the project?
- Does the proposed project have feasible plans to expand into additional NTDs/parasitic diseases or countries after Year 1?

## Environment

- Does the application outline a plan to expand to other endemic countries in the future?

- Will the scientific environment where the work will be done improve the chances of success?
- Are the institutional support, equipment, and other physical resources available to the investigators adequate for the proposed project?
- Will the project benefit from unique features of the scientific environment, subject populations, or collaborative arrangements?
- How will findings be shared with communities?

## Additional review criteria

When applicable to a proposed project, reviewers will evaluate the following additional items and consider them when assigning an impact score but will not give separate scores for these items.

- Does the application prioritize parasitic NTDs?
- Is the application from a local institution in NTD endemic country that:
  - Includes activities in multiple countries or US territories?
  - Address more than one NTD/parasitic disease?

## Protection of human subjects

If the research involves human subjects but does not involve one of the six categories of research that are exempt under [45 CFR part 46](#), and, as applicable, [21 CFR part 50](#) and [21 CFR part 56](#), the committee will evaluate the justification for involvement of human subjects and the proposed protections from research risk relating to their participation using the following five review criteria:

- Risk to subjects.
- Adequacy of protection against risks.
- Potential benefits to the subjects and others.
- Importance of the knowledge to be gained.
- Data and safety monitoring for clinical trials.

For research that involves human subjects and meets the criteria for one or more of the six categories of research that are exempt under [45 CFR part 46](#), the committee will evaluate:

- The justification for the exemption.
- Human subject involvement and characteristics.
- Sources of materials.

## Including children in research

When the proposed project involves clinical research, the committee will evaluate the proposed plans for the inclusion of children.

For more information, see [Additional Requirement 28: Inclusion of Persons Under the Age of 21 in Research](#).

## Vertebrate animals

The committee will evaluate the involvement of live vertebrate animals as part of the scientific assessment according to the following four points:

- Proposed use of the animals, and species, strains, ages, sex, and numbers to be used.
- Justifications for the use of animals and for the appropriateness of the species and numbers proposed.
- Procedures for limiting discomfort, distress, pain, and injury to that which is unavoidable in the conduct of scientifically sound research including the use of analgesic, anesthetic, and tranquilizing drugs, or comfortable restraining devices.
- Methods of euthanasia and reason for selection if not consistent with the [AVMA Guidelines on Euthanasia](#).

For additional information on review of the vertebrate animals section, see the [Checklist for Applicants and Reviewers: Vertebrate Animals \[PDF\]](#).

## Biohazards

Reviewers will assess whether materials or procedures proposed are potentially hazardous to research personnel or the environment, and if needed, determine whether adequate protection is proposed.

## Improving the safety and security of biological research

Under the [Executive Order on Improving the Safety and Security of Biological Research](#), the CDC will not accept competitive grant or cooperative agreement applications for dangerous gain-of-function research (as defined in Section 8 of the order).

This prohibition will remain in effect unless or until a new policy described in Section 4(a) of the Executive Order on Improving the Safety and Security of Biological Research modifies or rescinds this prohibition.

## Additional review considerations

As applicable for the project proposed, reviewers will consider each of the following items and may provide comments. They will not give scores for these items or consider them in providing an overall impact/priority score.

### Budget and period of support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

- Awards are contingent on availability of funds.
- Relevance of the proposed project to program priorities.
- Possible donor funding restrictions.

### Resource-sharing plan

Reviewers will comment on whether the resource-sharing plan (for example, sharing model organisms) or the rationale for not sharing the resources is reasonable.

After the merit review of your application is complete, the PD/PI will be able to access their summary statement in [eRA Commons](#).

## Second level of merit review

After the first level of merit review, we refer applications to a second level of review where they are evaluated based on their value in relation to:

- Program priorities.
- Program relevance.
- Research portfolio balance.
- Geographic considerations.
  - Work is proposed in multiple NTD endemic countries and/or US territories.
- Budgetary considerations.
  - Itemized budget of project activities is provided.

We do not consider **voluntary** cost sharing as part of the merit review process.

## Risk review

Before making an award, we review the risk that you will not prudently manage federal funds. We need to make sure you've handled any past federal awards well and demonstrated sound business practices. We use SAM.gov [Responsibility / Qualification](#) to check this history for awards. We also check Exclusions.

You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

We may ask for additional information prior to award based on the results of the risk review.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [2 CFR 200.206](#).

## Selection process

When making funding decisions, we consider:

- Scientific merit review results. The results of the first- and second-level reviews are key in making decisions but are not the only factor.
- Availability of funds.
- Relevance of the proposed project to program priorities, including but not limited to:
  - Demonstrated ability to conduct NOFO-related activities across multiple endemic countries or U.S. territories.
  - Projects focused on parasitic NTDs.
  - Recent or current experience working with ministries of health and/or CDC in NTD/parasitic disease endemic countries.

We may:

- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a prime recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

Our ability to make awards depends on available appropriations.

# Award notices

If you are successful, we will email a Notice of Award (NoA) to your authorized official.

We will email you or write you a letter if your application is not responsive or unsuccessful.

The NoA is the only official award document. The NoA tells you about the amount of the award, important dates, and the terms and conditions you need to follow. Until you receive the NoA, you don't have permission to start work.

Once you draw down funds, you have accepted all terms and conditions of the award.

If you want to know more about NoA contents, go to [Understanding Your Notice of Award](#) at CDC's website.



# Step 5:

# Submit Your Application

## In this step

Submission requirements and deadlines [43](#)

# Submission requirements and deadlines

## Required letter of intent

Due on June 18, 2026.

You must let us know if you plan to apply for this opportunity. We do this to plan for the number of reviewers we will need to evaluate applications. You must submit a letter of intent to apply.

Please email the notice to [SPittBarnes@cdc.gov](mailto:SPittBarnes@cdc.gov).

In your email, include:

- The funding opportunity number and title.
- Your organization's name and address.
- A contact name, phone number, and email address.
- The descriptive title of your proposed research.
- Names of your project director or principal investigator and other key personnel.
- Participating institutions.

## Application

**Due on Monday, July 6, 2026, at 11:59 p.m. ET.**

We encourage you to submit your application before the application deadline.

Grants.gov creates a date and time record when it receives the application. If you submit the same application more than once, we will accept the last on-time submission.

The grants management officer may extend an application due date based on emergency situations such as documented natural disasters or a verifiable widespread disruption of electric or mail service.

## Submission methods

Your organization's authorized official must certify your application.

To submit your application, you have three choices:

- Submit your application directly in Grants.gov using Workspace.
- Use eRA ASSIST, which connects to Grants.gov.
- Use a different system-to-system interface of your choice that connects to Grants.gov.

See [Contacts and Support](#) if you need help.

## File format for all submissions

You must submit all text attachments to the Adobe application forms as PDFs. All text attachments must use the agency-specific formatting requirements noted in the SF424 (R&R) Application Guide.

See [How to Apply - Application Guide](#). The Application guides for FORMS-I application packages are also posted here.

## Grants.gov

You must submit your application through Grants.gov. See [get registered](#).

For instructions on how to submit in Grants.gov, see the [Quick Start Guide for Applicants](#). Make sure your application passes the Grants.gov validation checks. Do not encrypt, zip, or password-protect any files.

See [Contacts and Support](#) if you need help.

## eRA ASSIST

The Application Submission System and Interface for Submission Tracking (ASSIST) helps you prepare your application, submit it through Grants.gov, and track it.

You must have an eRA Commons ID to use this system. The system will prompt your signing official to enter the Grants.gov Authorized Organizational Representative (AOR) credentials to submit the application.

For instructions, see [Using ASSIST](#) and [Submit the Application](#).



# Step 6: Learn What Happens After Award

## In this step

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# Post-award requirements and administration

We adopt by reference all materials included in the links within this NOFO.

## Administrative and national policy requirements

There are important rules you need to read and know if you get an award. You must follow:

- All terms and conditions in the Notice of Award (NoA), including [CDC General Terms and Conditions](#). The NoA includes the requirements of this NOFO.
- The rules listed in [2 CFR 200](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, or any superseding regulations, including HHS-specific requirements in [2 CFR 300](#).
- The HHS [Grants Policy Statement](#) (GPS). This document has policies relevant to your award. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including the cited authority in this award, the funding authority used for this award, and those provisions in the [HHS Administrative and National Policy Requirements](#).
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, recipients certify compliance with all federal antidiscrimination laws and these requirements and that complying with those laws is a material condition of receiving federal funding streams. Recipients are responsible for ensuring subrecipients, contractors, and partners also comply.
- We can take corrective or enforcement actions if your performance is poor, in accordance with [2 CFR 200.339](#) and [2 CFR 200.340](#), as appropriate.

## Reporting

If you are successful, you will have to submit financial and performance reports. These include:

Report	Description	When
Annual Performance Report (Research Performance Progress Report)	<ul style="list-style-type: none"> <li>• Serves as yearly continuation application.</li> <li>• Includes performance measures, successes, and challenges.</li> <li>• Updates research plan.</li> <li>• Includes how CDC could help overcome challenges.</li> <li>• Includes budget for the next 12-month budget period.</li> <li>• Complete list of the publications planned or completed to date - including status (e.g., published [include reference], in review, under development).</li> <li>• Description of any changes made in the use of human subjects or IRB approval status.</li> <li>• Includes how data are collected and used (Data Management Plan).</li> </ul>	120 days prior to the end of the budget period, or the date identified in guidance that CDC distributes.
Annual Federal Financial Report (FFR)	<ul style="list-style-type: none"> <li>• Includes funds authorized and disbursed during the budget period.</li> <li>• Indicates exact balance of unobligated funds and other financial information.</li> </ul>	90 days after the end of each budget period.

Report	Description	When
Data on Performance Measures	<ul style="list-style-type: none"> <li>Includes information similar to the Annual Performance Report.</li> </ul>	CDC will only require this report if it needs more frequent reporting than in the Annual Performance Report.
Final Performance Report	<ul style="list-style-type: none"> <li>Includes information similar to the Annual Performance Report.</li> </ul>	120 days after the end of the period of performance.
Final Federal Financial Report (FFR)	<ul style="list-style-type: none"> <li>Includes information in Federal Financial Report.</li> </ul>	120 days after the end of the period of performance.
Foreign Tax Report	<ul style="list-style-type: none"> <li>Amount of foreign taxes assessed, reimbursed, and unreimbursed by each foreign government.</li> <li>Also applies to subawards.</li> </ul>	<ul style="list-style-type: none"> <li>Annually by November 16.</li> <li>Quarterly by January 15, April 15, July 15, and October 15 each year.</li> </ul>

To learn more about these reporting requirements, see [Reporting](#) on the CDC website.

## CDC award monitoring

If you receive an award, CDC will monitor your activities. To learn more about CDC award management, see [Resources for CDC Recipients](#).

A cooperative agreement has substantial CDC programmatic involvement with the recipients during the performance of activities.

We will place the following roles and responsibilities in the terms and conditions of the award.

## Recipient roles and responsibilities

- The recipient has the dominant role and primary responsibility for the project as a whole.
- The PD(s)/PI(s) have the primary responsibility for complying with the responsibilities for the extramural investigators in the [Data Management and Access](#).
- Recipients retain custody of and have primary rights to the data and software developed under these awards, subject to government rights of access consistent with current DHHS, PHS, and CDC regulations and

policies. Recipients must comply with applicable rules in 2 CFR 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, including HHS-specific requirements in 2 CFR 300.

Specifically, for this NOFO, the recipient is expected to:

- Collaborate closely, share data and results as needed to achieve project objectives, and have regular communication with the CDC program staff, CDC country offices, CDC in-country POCs, and other CDC-funded partners where applicable.
- Ensure the protection of human subjects through ethical review of all protocols involving human subjects at the local institution and at CDC and obtaining the appropriate Institutional Review Board approvals for all institutions or individuals engaged in the conduct of the research project.
- Work with CDC scientists to obtain OMB-PRA approvals, as needed.
- Report and share research and scientific findings, such as in peer-reviewed journals, scientific presentations, reports, meetings, or conferences. Translate the findings so that a variety of audiences can understand them, including policy makers, practitioners, public health programs, healthcare institutions, professional organizations, community groups, researchers, and other potential users.
- Report and share research and scientific findings, such as in peer-reviewed journals, scientific presentations, reports, meetings, or conferences. Translate the findings so that a variety of audiences can understand them, including policy makers, practitioners, public health programs, healthcare institutions, professional organizations, community groups, researchers, and other potential users.
- Publications, journal articles, presentations, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, for example: "This publication (journal article, etc.) was supported by the Cooperative Agreement Number above from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention." In addition, the PI/PD must provide CDC with abstracts or manuscripts prior to any publication related to this funding. The recipient will not seek to publish or present results or findings from this project without prior clearance and approval from CDC.

## CDC's role

- The HHS/CDC purpose is to support and stimulate the recipients' activities through involvement and working jointly with recipients in partnership.
- CDC staff has substantial programmatic involvement that is above and beyond the normal stewardship role in awards.
- CDC project officers will not assume direction, prime responsibility, or a dominant role in the activities.
- CDC staff will assist the PI, as needed, to comply with the responsibilities for the extramural investigators in the [Data Management and Access](#).

Specifically, for this NOFO, CDC will:

- Help prepare the paperwork to submit research protocols to the CDC Institutional Review Board for review, as needed.
- Obtain Office of Management and Budget approval per the Paperwork Reduction Act, if necessary.

Additionally, a program official, aka a scientific program officer (SPO), named in the Notice of Award will be responsible for the normal scientific and programmatic stewardship of the award as described below:

- Serve as the primary point of contact for official pre-award activities and for all award-related activities, including an annual review of the grantee's performance as part of the request for continuation application.
- Make recommendations on requests for changes in scope, objectives, and or budgets that deviate from the approved peer-reviewed application.
- Carry out continuous review of all activities to ensure objectives are met.
- Attend committee meetings and participate in conference calls for the purposes of assessing overall progress, and for program evaluation purposes.
- Monitor performance against approved project objectives.



# Contacts and Support

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# Agency contacts

## Scientific and research

Jocelyn Patterson Mosley, MPH, MA

Scientific Program Officer

404-639-6437

[jpatterson@cdc.gov](mailto:jpatterson@cdc.gov)

## Scientific merit review

Seraphine Pitt Barnes, PhD

Scientific Research Officer

770-488-6115

[SPittBarnes@cdc.gov](mailto:SPittBarnes@cdc.gov)

## Grants management

Sharon Cassell

Grants Management Officer

770-488-2703

[ZPR0@cdc.gov](mailto:ZPR0@cdc.gov)

# Help with systems

## Grants.gov

Grants.gov provides [24/7 support](#) (closed on federal holidays).

You can call 1-800-518-4726 or email [support@grants.gov](mailto:support@grants.gov). Hold on to your ticket number.

## SAM.gov

If you need help, you can call 866-606-8220 or live chat with the [Federal Service Desk](#).

## eRA Commons

Contact the [eRA Commons Help Desk](#) for questions regarding eRA Commons registration, tracking application status, and post-submission issues. The Help

Desk is open Monday through Friday from 7 a.m. to 8 p.m. ET. Closed on federal holidays.

You can call toll free at 301-402-7469 or 866-504-9552 or TTY 301-451-5939.

You can email [commons@od.nih.gov](mailto:commons@od.nih.gov).

## Reference websites

- [U.S. Department of Health and Human Services \(HHS\)](#)
- [Grants Dictionary of Terms](#)
- [CDC Grants: How to Apply](#)
- [Research Instructions \[PDF\]](#)
- [CDC Grants: Already Have a CDC Grant?](#)
- [Grants.gov Accessibility Information](#)
- [Code of Federal Regulations \(CFR\)](#)
- [United States Code \(U.S.C.\)](#)
- [Bayh-Dole Regulations](#)