Specialized Programs of Research Excellence (SPOREs) Information

**The purpose of this document is to highlight important components and requirements of PAR-23-284. Please read this announcement in it's entirety before preparing an application.*

Translation Research Program website: https://trp.cancer.gov/

Standard due dates of January 25th, May 25th and September 25th. All SPORE start dates are June 1st.

The program will fund P50 SPORE grants to support state-of-the-art investigator-initiated translational research that will contribute to improved prevention, early detection, diagnosis, and treatment of an organ-specific cancer or a highly related group of cancers. For the purpose of this NOFO, a group of highly related cancers are those that are derived from the same organ system, such as gastrointestinal, neuroendocrine, head and neck, and other cancers. Other programmatically appropriate groups of cancers may include those centered around a common biological mechanism critical for promoting tumorigenesis and/or cancer progression in organ sites that belong to different organ systems. For example, a SPORE may focus on cancers caused by the same infectious agent or cancers promoted and sustained by dysregulation of a common signaling pathway. In addition, a SPORE may focus on cross-cutting themes such as pediatric cancers or cancer health disparities. The research supported through this program must be translational and must stem from research on human biology using cellular, molecular, structural, biochemical, and/or genetic experimental approaches. SPORE projects must have the goal of reaching a translational human endpoint within the project period of the grant.

Requirements:

- All Projects must be translational
- Must stem from research on human biology using cellular, molecular, structural, biochemical, and/or genetic experimental approaches
- All Projects must have the goal of reaching a translational human endpoint within the project
- Must include at least one project that proposes, as a specific aim, a SPORE investigator-initiated clinical trial.
- Must demonstrate a commitment to both horizontal and vertical collaboration
- PI and Program must be an integral part of the Cancer Center
- Must include the following components
    - A minimum of 3 projects with a human endpoint, with 1 project proposing a clinical trial that is SPORE-initiated
        - Each project must be co-lead by a basic AND applied/clinical scientist.
    - Administrative Core
    - Shared Resourced Cores, one of which must be a Biospecimen/Pathology Core. A biostatistical core is strongly encouraged. These Cores should not duplicate facilities already available to the group but may build upon them for unique capabilities required by the SPORE
    - Developmental Research Program (DRP)
    - Career Enhancement Program (CEP)
- Pre-Application consultation with NCI staff 4-6 months in advance of the application due date
- $1.4 M direct cost cap per year.
- Minimum effort requirements
    - Each PD/PI must serve a combined effort of at least 2.4 person months

    - Each project and core leader must commit an effort of at least .6 person months
    - Each DRP and CEP leader must commit an effort of at least .3 person months
- A letter of support from the institution AND the Cancer Center are required

SPORE applications are encouraged to include:

- Research advocates as well as patient advocates with a collective patient perspective
- Early Detection, Prevention, or Population Science (qualified EPPS) project(s) may request up to an additional $120,000 in direct costs/year to support this project(s) and supporting cores, if appropriate.
- Cancer Health Disparities/Minority Health (CHC-MH) projects would allow an additional $120,000 in direct costs/year to be requested for the project(s) and supporting cores, if appropriate.
- Women , individuals from underrepresented racial and ethnic groups, and individuals with disabilities
- Research projects that bring together investigators from multiple institutions to facilitate the development of large-scale team-based projects
- Directors and investigators should participate in NCI-sponsored meetings, workshops and working groups
- Secure discretionary funds from the institution

PI Eligibility

- Investigators can only serve as a PI/multi-PI on one funded SPORE P50 at a time. However, investigators may have other roles (i.e., co-leader, Core director) on multiple SPORE P50s concurrently, even from more than one institution.
- *Minimum Research Base:* In order for a SPORE application to be programmatically considered for award by NCI, the application must include four or more independent investigators who currently serve as PDs/PIs (or project leaders) on peer-reviewed research grants (e.g., R01, R21, P01, U01, U10, U19, American Cancer Society [ACS], U.S. Department of Defense [DOD], or equivalent) or are overall chairpersons or site chairpersons on an active NCI-sponsored clinical trial. These activities must be directly related to the cancer(s) being investigated in the SPORE or the specific expertise required for the SPORE. PDs/PIs supported by the NCI's non-mentored "K" career development grants or the R00 portion of the K99/R00 award can also be included in the research base requirement if the career award is directly relevant to the cancer(s) being investigated or the specific expertise required for the SPORE project. Please note that an investigator who is a PD/PI on multiple qualified grants or clinical trials counts only once towards the research base, and to qualify, the investigator must be the PD/PI on the highlighted activity. The qualifying investigators also must serve on the SPORE as a PD/PI, a multi-PD/PI, project co-leader or Shared Resources Core director.
- Each PD/PI must serve a combined effort of at least 2.4 person months (PM) unless there are three or more PD/PIs in multiple PD/PI applications. In such a case, the minimum level of effort can be reduced to 1.8 PM for each multiple PD/PI.
- If an applicant's institution is associated with an NCI-designated Cancer Center, the SPORE PD/PI should hold a senior position in the Cancer Center. Alternatively, if this position is not currently held, an appointment for such a position should begin once NCI SPORE funding is secured.

Review Criteria by component

Overall

Significance

- Does the SPORE address an important problem or a critical barrier to progress in the field? Is the prior research that serves as the key support for the proposed project rigorous? If the aims of the SPORE are achieved, how will scientific knowledge, technical capability, and/or clinical practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field?
- Specific for this NOFO: To what extent do the efforts described in the PEDP further the significance of the project?

In addition, for applications involving clinical trials:

- Are the scientific rationale and need for a clinical trial to test the proposed hypothesis or intervention well supported by preliminary data, clinical and/or preclinical studies, or information in the literature or knowledge of biological mechanisms? For trials focusing on clinical or public health endpoints, is this clinical trial necessary for testing the safety, efficacy or effectiveness of an intervention that could lead to a change in clinical practice, community behaviors or health care policy? For trials focusing on mechanistic, behavioral, physiological, biochemical, or other biomedical endpoints, is this trial needed to advance scientific understanding?

Investigator(s)

- Are the PD(s)/PI(s), collaborators, and other researchers well suited to the SPORE? If Early Stage Investigators or those in the early stages of independent careers, do they have appropriate experience and training? If established, have they demonstrated an ongoing record of accomplishments that have advanced their field(s)? If the project is collaborative or multi-PD/PI, do the investigators have complementary and integrated expertise; are their leadership approach, governance and organizational structure appropriate for the project?

Specific for this NOFO: To what extent will the efforts described in the PEDP strengthen and enhance the expertise required for the project?

In addition, for applications involving clinical trials:

- With regard to the proposed leadership for the project, do the PD/PI(s) and key personnel have the expertise, experience, and ability to organize, manage and implement the proposed clinical trial and meet milestones and timelines? Do they have appropriate expertise in study coordination, data management and statistics? For a multicenter trial, is the organizational structure appropriate and does the application identify a core of potential center investigators and staffing for a coordinating center?

Innovation

- Does the application challenge and seek to shift current research or clinical practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Are the concepts, approaches or methodologies, instrumentation, or interventions novel to one field of research or novel in a broad sense? Is a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed?

Specific for this NOFO: To what extent will the efforts described in the PEDP meaningfully contribute to innovation?

In addition, for applications involving clinical trials:

- Does the design/research plan include innovative elements, as appropriate, that enhance its sensitivity, potential for information or potential to advance scientific knowledge or clinical practice?

Approach

- Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the SPORE? Have investigators included plans to address weaknesses in the rigor of prior research that serves as the key support for the proposed project? Have the investigators presented strategies to ensure a robust and unbiased approach, as appropriate for the work proposed? Are potential problems, alternative strategies, and benchmarks for success presented? If the project is in the early stages of development, will the strategy establish feasibility and will particularly risky aspects be managed? Have the investigators presented adequate plans to address relevant biological variables, such as sex, for studies in vertebrate animals or human subjects?

If the SPORE involves human subjects and/or NIH-defined clinical research, are the plans to address:

1) the protection of human subjects from research risks, and
2) inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion or exclusion of individuals of all ages (including children and older adults), justified in terms of the scientific goals and research strategy proposed?

Specific for this NOFO: Are the timeline and milestones associated with the PEDP well-developed and feasible?

Does the application adequately address the following, if applicable:

- *Study Design*
    - Is the study design justified and appropriate to address primary and secondary outcome variable(s)/endpoints that will be clear, informative and relevant to the hypothesis being tested? Is the scientific rationale/premise of the study based on previously well-designed preclinical and/or clinical research? Given the methods used to assign participants and deliver interventions, is the study design adequately powered to answer the research question(s), test the proposed hypothesis/hypotheses, and provide interpretable results? Is the trial appropriately designed to conduct the research efficiently? Are the study populations (size, gender, age, demographic group), proposed intervention arms/dose, and duration of the trial, appropriate and well justified?
    - Are potential ethical issues adequately addressed? Is the process for obtaining informed consent or assent appropriate? Is the eligible population available? Are the plans for recruitment outreach, enrollment, retention, handling dropouts, missed visits, and losses to follow-up appropriate to ensure robust data collection? Are the planned recruitment timelines feasible and is the plan to monitor accrual adequate? Has the need for randomization (or not), masking (if appropriate), controls, and inclusion/exclusion criteria been addressed? Are differences addressed, if applicable, in the intervention effect due to sex/gender and race/ethnicity?
    - Are the plans to standardize, assure quality of, and monitor adherence to, the trial protocol and data collection or distribution guidelines appropriate? Is there a plan to obtain required study agent(s)? Does the application propose to use existing available resources, as applicable?
- *Data Management and Statistical Analysis*

- Are planned analyses and statistical approach appropriate for the proposed study design and methods used to assign participants and deliver interventions? Are the procedures for data management and quality control of data adequate at clinical site(s) or at center laboratories, as applicable? Have the methods for standardization of procedures for data management to assess the effect of the intervention and quality control been addressed? Is there a plan to complete data analysis within the proposed period of the award?

Environment

- Will the scientific environment in which the work will be done contribute to the probability of success? Are the institutional support, equipment and other physical resources available to the investigators adequate for the project proposed? Will the project benefit from unique features of the scientific environment, subject populations, or collaborative arrangements?

Specific for this NOFO: To what extent will features of the environment described in the PEDP (e.g., collaborative arrangements, geographic diversity, institutional support) contribute to the success of the project?

- If proposed, are the administrative, data coordinating, enrollment and laboratory/testing centers, appropriate for the trial proposed?
- Does the application adequately address the capability and ability to conduct the trial at the proposed site(s) or centers? Are the plans to add or drop enrollment centers, as needed, appropriate?
- If international site(s) is/are proposed, does the application adequately address the complexity of executing the clinical trial?
- If multi-sites/centers, is there evidence of the ability of the individual site or center to: (1) enroll the proposed numbers; (2) adhere to the protocol; (3) collect and transmit data in an accurate and timely fashion; and, (4) operate within the proposed organizational structure?

Scientific Collaboration (in the Overall component)

The Scientific Collaboration section is part of the Overall component. Reviewers will assign a numerical score to only this section of the Overall based on the following criteria.

- *Horizontal Collaborations:* Do any/many of the proposed projects (and the Developmental Research Program, if appropriate) detail scientific collaboration with investigators outside of the SPORE, including other SPOREs, other NIH/NCI programs, or other government or non-government organizations such that information, expertise, and resources are shared to complete translational goals within the SPORE more rapidly and efficiently? Are the plans to promote collaborative projects by the SPORE leadership adequately addressed? For new SPORE applications, are plans described for collaborative projects, and are these plans sufficient? For renewal applications, have proposed milestones and timelines in collaborative activities been reached? Does the participation in and outcome of collaborative projects and programs contribute to the overall translational goals of the SPORE?
- *Vertical Collaborations:* For renewal applications, has the SPORE participated in trans-NCI mechanisms, or has it partnered with ongoing trials for SPORE-initiated biomarker studies, or has it used other grant or contract mechanisms to expand clinical studies that were begun in the SPORE, collaboratively outside the P50 mechanism, or has it partnered with industry to continue the development of a SPORE concept? Have proposed milestones and timelines in collaborations been met? Has the SPORE leadership played an important role in moving SPORE concepts through translational/clinical development so that patients can most quickly reap the

benefits of SPORE research? For new applications, is there a plan for potential collaborative agreements in developing cancer therapeutics and biomarkers, and for expanding population and cancer prevention studies beyond the limits of the SPORE, should early clinical studies prove to be successful?

Research Projects

Significance

- Does the project address an important translational research goal or barrier for this particular organ site, theme or related group of cancers? Is the prior research that serves as the basis for the proposed project rigorous? If the aims of the project are achieved, how will scientific knowledge, technical capability, and/or clinical practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventive interventions that drive this field?

In addition, for applications involving clinical trials:

- Are the scientific rationale and need for a clinical trial to test the proposed hypothesis or intervention well supported by preliminary data, clinical and/or preclinical studies, or information in the literature or knowledge of biological mechanisms? For trials focusing on clinical or public health endpoints, is this clinical trial necessary for testing the safety, efficacy or effectiveness of an intervention that could lead to a change in clinical practice, community behaviors or health care policy? For trials focusing on mechanistic, behavioral, physiological, biochemical, or other biomedical endpoints, is this trial needed to advance scientific understanding?

Investigators

- Are the Project co-leaders, collaborators, and other researchers well suited to the project? Is there adequate evidence of co-leadership of the project by basic and applied/clinical investigators in the conception, design, and proposed implementation of the project? If investigators are in the early stages of independent careers or are new to translational cancer research, do they have appropriate experience and training? If established, have they demonstrated an ongoing record of accomplishments that have advanced their field(s)? If the project is collaborative with other groups, do the investigators have complementary and integrated expertise; are their leadership approaches, governance and organizational structures appropriate for the project?

In addition, for applications involving clinical trials;

- With regard to the proposed leadership for the project, do the PD/PI(s) and key personnel have the expertise, experience, and ability to organize, manage and implement the proposed clinical trial and meet milestones and timelines? Do they have appropriate expertise in study coordination, data management and statistics? For a multicenter trial, is the organizational structure appropriate and does the application identify a core of potential center investigators and staffing for a coordinating center?

Innovation

- Does the project challenge and seek to shift current research or clinical practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions in the context of translational research? Are the concepts, approaches or methodologies, instrumentation, or interventions novel to one field of research? Are the concepts novel in a broad sense? Is a refinement, improvement, or new application of

theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed?

In addition, for applications involving clinical trials;

- Does the design/research plan include innovative elements, as appropriate, that enhance its sensitivity, potential for information or potential to advance scientific knowledge or clinical practice?

Approach

- Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the project? Have investigators included plans to address weaknesses in the rigor of prior research that serves as the key support for the proposed project? Have the investigators presented strategies to ensure a robust and unbiased approach, as appropriate for the work proposed? Are potential problems, alternative strategies, and benchmarks for success presented? If the project is in the early stages of development, will the strategy establish feasibility and will particularly risky aspects be managed? Have the investigators presented adequate plans to address relevant biological variables, such as sex, for studies in vertebrate animals or human subjects?

Specific for this FOA: Does the application adequately address the following, if applicable:

- How likely is it that the research will achieve the proposed human endpoint within the 5-year project period? How likely is it that all the aims will be completed within the project period? If the project is ongoing and has changed research direction, how appropriate is the rationale for the new approach? How justified are the plans for (1) protection of human subjects from research risks and (2) inclusion of underserved, women, and individuals of all ages (including children and older adults) as research subjects in terms of the scientific goals and research strategy proposed? Note: Aspects of collaboration unrelated to scientific data will be reviewed in the Scientific Collaboration section (Overall component) and not in the SPORE Research Projects section. How appropriate is the plan describing how bioinformatics and data management capabilities of the project, as relating to the cancer center, institution, or activities of other NIH/NCI initiatives, will be developed and used for data administration?

In addition, for applications involving clinical trials;
Does the application adequately address the following, if applicable:

- *Study Design*
    - Is the study design justified and appropriate to address primary and secondary outcome variable(s)/endpoints that will be clear, informative and relevant to the hypothesis being tested? Is the scientific rationale/premise of the study based on previously well-designed preclinical and/or clinical research? Given the methods used to assign participants and deliver interventions, is the study design adequately powered to answer the research question(s), test the proposed hypothesis/hypotheses, and provide interpretable results? Is the trial appropriately designed to conduct the research efficiently? Are the study populations (size, gender, age, demographic group), proposed intervention arms/dose, and duration of the trial, appropriate and well justified?
    - Are potential ethical issues adequately addressed? Is the process for obtaining informed consent or assent appropriate? Is the eligible population available? Are the plans for recruitment outreach, enrollment, retention, handling dropouts, missed visits, and losses to follow-up appropriate to ensure robust data collection? Are the planned recruitment timelines feasible and is the plan to monitor accrual adequate? Has the

need for randomization (or not), masking (if appropriate), controls, and inclusion/exclusion criteria been addressed? Are differences addressed, if applicable, in the intervention effect due to sex/gender and race/ethnicity?
    - Are the plans to standardize, assure quality of, and monitor adherence to, the trial protocol and data collection or distribution guidelines appropriate? Is there a plan to obtain required study agent(s)? Does the application propose to use existing available resources, as applicable?

- *Data Management and Statistical Analysis*
    - Are planned analyses and statistical approach appropriate for the proposed study design and methods used to assign participants and deliver interventions? Are the procedures for data management and quality control of data adequate at clinical site(s) or at center laboratories, as applicable? Have the methods for standardization of procedures for data management to assess the effect of the intervention and quality control been addressed? Is there a plan to complete data analysis within the proposed period of the award?

Environment

- Will the scientific environment in which the work will be done contribute to the probability of success? Are the institutional support, equipment and other physical resources available to the investigators adequate for the project proposed? Will the project benefit from unique features of the scientific environment, subject populations, or collaborative arrangements?

Specific for this FOA: Does the application adequately address the following, if applicable:

- In the case of multiple institutions involved in a single SPORE, how adequate is the plan for communication among investigators to achieve the goals of the grant? How evident is the institutional support? How evident is the effective use of SPORE Cores ?

In addition, for applications involving clinical trials

- If proposed, are the administrative, data coordinating, enrollment and laboratory/testing centers, appropriate for the trial proposed?
- Does the application adequately address the capability and ability to conduct the trial at the proposed site(s) or centers? Are the plans to add or drop enrollment centers, as needed, appropriate?
- If international site(s) is/are proposed, does the application adequately address the complexity of executing the clinical trial?
- If multi-sites/centers, is there evidence of the ability of the individual site or center to: (1) enroll the proposed numbers; (2) adhere to the protocol; (3) collect and transmit data in an accurate and timely fashion; and, (4) operate within the proposed organizational structure?

Admin Core:

Leadership

- Are the scientific qualifications, involvement, leadership and time commitment of the Co-Leaders sufficient for requirements of the proposed SPORE? (Leadership for collaborations will be reviewed in the Scientific Collaboration section, now part of the Overall component.)

Administrative Management

- Does the plan for the Administrative Core adequately address how the SPORE will be managed administratively including the fiscal and data operations? Are the communication aspects of the SPORE facilitated by this Core adequately addressed, particularly if there is more than one

institution involved in the proposed research? Is there evidence that appropriate clerical and administrative personnel and quality controls are in place for the smooth running and total integration of the SPORE? Are the qualifications, experience, and commitment of the Shared Resources Core Director(s) and other key personnel adequate and appropriate for providing the proposed facility or services? Will this Core provide adequate meeting/travel support, and support for the advisory boards? Are the qualifications, experience, and commitment of the Core Director(s) and other key personnel adequate? Does the proposed plan include a succession plan for SPORE leadership that could be enacted in the event that the SPORE PD(s)/PI(s) is no longer willing or able to lead the SPORE? If patient advocates are included, are their activities appropriate to the goals of the SPORE?

Institutional Commitment

- Is the institutional commitment for facilitating the research objectives of the SPORE (e.g., through special facilities, recruitments, discretionary funding, supplemental resources for CEP and DRP) sufficiently documented?

Integration of the SPORE within the Institution

- Are the activities of SPORE projects and proposed Cores well integrated into the institution? Does the entire SPORE integrate with the existing cancer center/institute (e.g., use of clinical data and safety management systems, biostatistical and other Cores, etc.)? Is there evidence of, or plans for, coordination and communication across all components of the SPORE and among all participating institutions at the overall SPORE level?

Cancer Patient Population

- Is the access to patients and populations for conducting current and projected therapeutic, prevention, detection, and control research adequate to ensure likely success of the SPORE?

Planning and Evaluation of Activities

- Are the plans for and/or track record of evaluating the translational research productivity of existing projects and Cores adequate for the requirements of the proposed SPORE? Are the plans for and/or track record of use of advice from internal and external advisors sufficient? For renewal applications, is there evidence that the flexibility available to the SPORE has been used effectively?

Shared Resource Core(s)

Do the Shared Resources Core(s) provide essential functions or services for at least one project? Is there an appropriate plan describing the how bioinformatics and data management capabilities of the Shared Resources Core, as relating to the cancer center, institution, or activities of other NIH/NCI initiatives, will be developed and used for data administration?

Biospecimen/Pathology Core

Investigator

- How sufficient is the evidence of proficient personnel dedicated to the activities of specimen collection, annotation, quality control, storage, distribution, and analysis? How sufficient is the oversight of the collection of initial and follow-up clinical information, data entry, and maintenance of database and computer networks? For renewal applications, the performance and relative time commitments of these individuals should also be evaluated based on the past accomplishments of the Core.

Approach

- How adequately does the proposed plan for this Core address the development, annotation, and maintenance of a human cancer site-specific specimen resource, including linkage of specimens with pre-analytical parameters and pathological, clinical, and family history data that maximize their potential use in translational research?
- How adequately does the proposed plan address and prioritize the distribution of specimens within and outside the SPORE? For renewal applications, how clear is the documentation of the use of specimens by SPORE investigators within full and developmental projects, as well as the details, if applicable, describing the distribution and use of SPORE collected specimens outside the SPORE and/or institution?
- If applicable, how adequately does the proposed plan address the performance of specimen analysis (e.g., tissue microdissection, immunochemistry) and/or the development of new technologies and methodologies that enhance or benefit activities of the SPORE? For renewal applications, how clear is the documentation demonstrating that these analyses were critical to the success of certain projects and are worthy of continued support, if requested?
- How adequately does the proposed plan give sufficient evidence that the activities of the Core are well integrated with those of the projects and that the investigators within the projects are working closely with those of the Core to meet project objectives?
- How adequately does the proposed plan address if and how the investigators will obtain written informed consent for all prospectively collected tissues/specimens in a manner that will protect patient confidentiality and enable studies?

Environment

- Does the proposed plan augment and/or complement any existing specimen resource supported by a Cancer Center Support Grant (CCSG; P30 grant mechanism) or other funding mechanism(s)? Do investigators applying from institutions with a CCSG and multiple SPORE grants address how their Core will benefit from already established infrastructure, databases, etc., that will enable this proposed specimen Core to be more cost effective and efficient?

Other Cores

Investigator

- Are the qualifications, experience, and commitment of the Shared Resources Core Director(s) and other key personnel adequate and appropriate for providing the proposed facilities or services?

Approach

- Is the proposed Shared Resources Core well matched to the needs of the overall SPORE? Does it provide essential facilities or services for one or more scored research projects? For renewal applications, does the application demonstrate the use of each Core by SPORE projects during the previous funding period?
- Does the proposed plan demonstrate that the activities of the Core are well-integrated with those of the projects and that the investigators within the projects are working closely with those of the Core to meet project objectives?
- What is the overall quality of the proposed Core services? Are adequate quality control processes proposed for the facilities or services provided by the Shared Resources Core (including procedures, techniques, and quality control)? What are the criteria for prioritization and usage of Shared Resources Core products and/or services?

- Will the proposed Shared Resources Core(s) provide cost effective services to the SPORE? Are there adequate plans to augment and/or complement an existing shared resource supported by an NCI Cancer Center Support grant (P30), if applicable?

Environment

- Is the environment for the Shared Resources Core adequate to support the program as proposed?

Developmental Research Program (DRP)

Reviewers will assign a numerical score based on adherence to the following criteria:

- Will the proposed plan for the DRP attract new ideas and pilot studies within and/or outside the SPORE institution(s)? Is the plan for periodic solicitation, review and funding of a spectrum of pilot projects, as well as for promoting pilot projects with translational research potential to full projects within the SPORE, adequate?
- For renewal applications, did the DRP generate a strong publication record? Were any high-risk/high-impact projects funded through the DRP? Did data produced by the DRP lead to success in the competition for outside funds or become a full SPORE project(s)? Wasfunding from the DRP used for collaborative projects with other institutions/programs?

Career Enhancement Program (CEP)

Reviewers will assign a numerical score based on the following criteria:

- Is the proposed plan to select promising candidates for independent careers (academic, industrial, governmental) in translational cancer research adequate? Is the plan for recruitment, retention and communication with awardees adequately addressed? For renewal applications, are the research activities, independent grant awards, publication(s), and promotion/current status of individuals who have been supported by the CEP addressed?
- Does the proposed plan address how the investigators will recruit prospective candidates from diverse backgrounds, including women, individuals from underrepresented racial/ethnic groups, and individuals with disabilities for the program?
- Does the proposed plan address periodic review of the CEP awardees and the role of mentors/advisors? For renewal applications, did any CEP projects become full SPORE projects?