

Request for Proposals (RFP)

2027 Career Development Award Program

RESEARCH OVERVIEW:

The Melanoma Research Foundation (MRF) is committed to advancing research across the spectrum of melanoma – from prevention through diagnosis, staging, treatment and survivorship. The MRF proactively partners with the NCI, Congress, the Department of Defense and other foundations to develop and collaborate on a broad agenda for melanoma research that takes full advantage of all opportunities, while also sharing challenges. Since 1998, the MRF has provided over \$28 million in funding for 398 innovative, high impact, basic, translational, and clinical research projects.

Letter of Intent (LOI):

Due to the high volume of applications expected, applicants must submit a one-page Letter of Intent (LOI). Selected applicants will then be invited to submit a full proposal.

Timeline:

- LOI Submission Deadline: November 13, 2026, at 11:59 PM ET
- Notification to Submit Full Application: January 2027
- Full Application Submission Deadline: March 31, 2027, at 11:59 PM ET
- Award Notification: August 2027

The award period is October 31, 2027 – October 30, 2029.

AWARD TYPES:

Career Development Awards (CDA): CDAs provide funding of up to \$50,000 per year for two years to junior investigators. Researchers who are beginning a research career focused on melanoma are eligible.

Mucosal Melanoma Career Development Awards (CDA): The Mucosal Melanoma CDA will provide funding of up to \$50,000 per year for two years to a junior investigator focusing on mucosal melanoma. The grant guidelines and application processes follow those of the regular CDA awards, but the proposed project must focus on mucosal melanoma.

SPECIFIC TOPIC PROPOSALS (STPs):

The identification of scientific topics that address unmet clinical needs in melanoma research were identified through a series of meetings of multidisciplinary experts from the MRF's Scientific Advisory Committee and Breakthrough Consortium Steering Committee. The following categories are the identified unmet needs in melanoma research selected as STPs for this funding cycle.

Applications are not required to address these STPs, although those that do might be given extra consideration. However, in all cases, scientific merit is the most important factor underlying the selection for funding.

Prevention, Early Detection, and Population Science

Screening for melanoma is a potentially important way to reduce melanoma mortality. However, melanoma is relatively uncommon and the ratio of number of screened patients for every melanoma diagnosed is high, without more accurate prediction of the population that should be screened. In

addition, melanoma can be difficult to diagnose, lending itself to false positives and negatives during the screening process.

In order to promote early diagnosis and decrease melanoma mortality, better methods of melanoma prevention, diagnosis, and risk stratification are necessary. Options might include targeted education to raise awareness of melanoma risk and prevention efforts focused on reducing thick melanoma incidence, the use of imaging, molecular biomarkers (including germline risks), and novel technologies -including artificial intelligence (AI) - to enhance the sensitivity and specificity of the clinical diagnosis of melanoma and/or minimize the morbidity associated with over biopsy of benign lesions. Use of quality of life and patient-reported outcome studies to quantify the harms associated with population-based melanoma screening is an important adjunct to new research. Additionally, survivorship research is needed to understand and mitigate the long-term impacts of screening, diagnosis, and treatment on patients' quality of life.

Tumor Cell Dormancy and Metastasis

Tumors do not progress in linear patterns but may undergo extensive dormant phases. Clinical Dormancy (the time between removing a primary tumor and relapse, especially at metastatic sites) remains one of the most critical issues surrounding durable responses in patients. The 2 escapes from clinical dormancy by melanoma and other cancer cells are likely responsible for most cancer-related deaths. Several mechanisms for dormancy have been proposed: single cell dormancy, where disseminated cells remain quiescent until triggered to proliferate by changes within the tumor cell or in the microenvironment; pre-angiogenic dormancy, where dormant micro metastases exist as clinically undetectable lesions that eventually grow into metastatic disease in response to angiogenic signaling; and immune-related dormancy where the immune system keeps tumor cell numbers in check. Additionally, it is not known how the preferred tissue tropism of tumor cells affects their dormancy. There is a major lack of understanding of what influences and regulates tumor dormancy, how dormant cells interact with their microenvironment, and most importantly, how they escape dormancy. Basic and translational research is badly needed in this area, which is vastly understudied and underfunded.

Immunotherapy and irAEs

Treatments for melanoma that utilize immunotherapy include drugs that enhance the immune system's ability to recognize and fight cancer, enhance the immunogenicity of the cancer, or provide novel ways of bringing immune cells to the tumor microenvironment. Immunotherapy agents have been used in the metastatic, the neoadjuvant/adjuvant space and increasingly in patients with resistance to frontline checkpoint inhibitor therapy. Cell-based therapies, such as tumor-infiltrating lymphocyte (TIL) therapy and engineered T-cell approaches, are also emerging as promising options for patients with advanced or refractory disease. Identification of biomarkers that can predict response, toxicity, and/or identify mechanisms of resistance and ways to overcome it, will improve the efficacy and safety of immunotherapy.

Advancement of Targeted Therapies Against Melanoma

Studies involving genomic profiles of melanoma patients led to the categorization of different melanoma subtypes (e.g. BRAF-mutant, NRAS-mutant, etc.), each with potential therapeutic targets. The past decade has seen multiple FDA approvals for targeted therapies for use in patients with BRAF-mutant melanoma; however, most patients do not achieve a durable response with these

agents. Further, research in other cancer types has shown the ability to target KRAS with therapeutic benefit, some of which may be applicable to targeting NRAS-mutant disease. Further elucidation of the DNA sequence and RNA expression profiles of melanomas will hopefully provide future insights into targeting these and other driver mutations. In addition, understanding the mechanisms of response/ resistance to existing agents may lead to the development of impactful combination treatment regimens.

Rare Melanoma Tumors

Melanoma is now recognized as a heterogeneous disease encompassing many molecular subtypes. Identifying mechanisms underlying the development of more rare subsets of melanoma (e.g., mucosal, acral, ocular, and pediatric melanoma) is expected to drive translational studies and clinical evaluations.

ELIGIBILITY GUIDELINES:

- Applicants who are postdoctoral fellows must be within 10 years of receiving their terminal degree (PhD, MD) at the time the grant is awarded and must not have previously received any major grant support (for example, from NIH, NCI, or DoD, ACS, or other foundations).
- Applicants who are not postdoctoral fellows may have a title of Research Associate/Scientist, Staff Scientist, Instructor, Assistant Professor, or equivalent at the time of the grant submission. Individuals in this category are not subject to the 10-year limit from their terminal degree. See below for allowable prior grant support for applicants in this category:
 - Allowed:
 - NIH grant types: K08, K99, K22, R21, R03
 - DOD Melanoma Academy Scholar Award
 - Foundation/Nonprofit grants intended to support early career investigators (except for prior MRF CDA grants)
 - Applicants are **not allowed** to have received the following grant types **as a PI** (note: applicants *are* allowed to have participated as a collaborator in the below grants, but shouldn't have led the grant as a PI):
 - NIH: R01 and other large independent grants including but not limited to U01, U54, P01, and SPOR
 - Major DOD awards
 - Prior MRF CDA or EIA grants
 - Other grants intended to support large independent research projects
- For this RFP, the MRF will not consider more than one applicant per lab. Multiple applicants from the same institution are eligible if they are not part of the same lab.
- Applicants are required to have at least one mentor. Mentors do not have to be at the applicant's own institution.
- Applicants must hold a PhD or MD degree or equivalent at the time of the grant submission.
- For this RFP, applicants may be the PI or co-PI on only one submitted application.
- Applicants are eligible to respond to other MRF RFPs, as long as the research proposals are significantly different.
- American citizenship is not required. However, for all grants, the proposed research must be conducted in a non-profit research organization, a medical institution or an educational institution located in the United States.
- Applicants must show evidence of strong departmental or institutional support and commitment.
- Applicants and co-PIs may not have an active MRF grant that's still in its base award period (please note: Applicants and co-PIs with an MRF award under a no-cost extension period are eligible to

apply).

- The use of relevant genetic models and/or human derived tumor samples is highly encouraged but not required.
- Proposed research must comply with all applicable National Institutes of Health (NIH) animal and human welfare guidelines.
- Applicants are encouraged to discuss any eligibility questions with the MRF prior to applying.

*Note: For Mucosal Melanoma CDAs, all eligibility guidelines above apply, with the additional requirement that the proposed research project must focus on mucosal melanoma.

REVIEW PROCESS:

The MRF's Research Grant Program emphasizes basic, translational and clinical research projects that explore innovative approaches to understanding critical problems pertaining to prevention, diagnosis, staging, and treatment of melanoma. All proposals will undergo rigorous peer review, where reviewers are selected based on their expertise in diverse areas of basic, translational and clinical melanoma research. Reviewers include members of the MRF's Scientific Advisory Committee (SAC), the Breakthrough Consortium (MRFBC), the Community United for Research and Education of Ocular Melanoma (CURE OM), the Dermatology Advisory Council (DAC), and members of the scientific and clinical melanoma community who are not in conflict with the application. The highest scoring applicants from the LOI stage will be invited to submit a full application. After review of the full applications, those with the highest scores will be assessed by a panel of representatives from the initial review committee. The top ranked applications are then recommended for funding to the MRF Board of Directors. The number of grants selected for funding is determined by the MRF Board of Directors, based on available funds.

AWARD ADMINISTRATION AND REPORTING:

Award decisions will be made in **August 2027**. Upon acceptance of the award, the PI and the Institution will be required to sign an award agreement accepting the MRF's terms and conditions.

Awards will cover research conducted over a two-year period. Funds are distributed three times each year for a total of six payments over two years per the following schedule, which will be documented in the award agreement:

- First payment: On or before October 31, 2027
- Second payment: On or before February 28, 2028
- Third payment: On or before June 30, 2028
- Fourth payment: On or before October 31, 2028
- Fifth payment: On or before February 28, 2029
- Sixth payment: On or before June 30, 2029

If a grantee needs more time to complete the research aims, a no-cost extension may be requested. No-cost extension requests must be submitted by the deadline specified in the award agreement, must include sufficient justification, and are subject to MRF approval.

Interim financial and scientific progress reports are to be submitted to the MRF no later than 30 days prior to the end of the grant's first year. Final financial and scientific reports, detailing all activities during the award period, are to be submitted to the MRF within 60 days of the end of the award period.

Acknowledgment of support from the MRF must accompany any published report using data or findings from research conducted under an award from the MRF. The intellectual property reviewed remains solely within the institution.

SCIENTIFIC DATA SHARING:

To expedite melanoma research, the MRF encourages the sharing of data and model organisms/ resources generated from its funded awards whenever possible. The MRF follows the [NIH Policies on Scientific Data Sharing](#) as applicable; specifically:

- A Data Management and Sharing Plan using the NIH DMS Plan format must be submitted as part of the MRF grant application. Information on the format page is available via this [link](#).
- It is anticipated that the Data Management and Sharing Plan will include information on the sharing of scientific and genomic data, as well as model organisms/ resources stemming from MRF funded work.
- The MRF requires journal articles resulting from MRF funding be submitted to PubMed Central immediately upon acceptance for publication. We recommend these manuscripts be published in open-access journals or that they be made freely available.
- Costs related to data and specimen sharing (e.g. open-access publication charges, data storage, etc.) can and should be included in the budget of your MRF research grant.

STEP-BY-STEP APPLICATION INSTRUCTIONS – Letter of Intent:

All applicants must submit a **LOI**. Please note, full proposals are by invitation only. Please carefully follow the steps in Proposal Central.

The MRF will accept LOI applications until November 13, 2026 at 11:59 PM ET.

All submissions and notifications will be completed entirely online through ProposalCentral (<https://proposalcentral.altum.com/>).

Please read the instructions carefully prior to beginning the online LOI submission process

Step 1: Title Page

The project title should not exceed the space provided (75 characters, including spaces).

Choose the grant program, from the list noted below, to which you are applying:

- Career Development Awards (CDA) – up to \$100,000 over a two-year period
- Mucosal Melanoma CDA – up to \$100,000 over a two-year period

The research period is for two years. The award period is October 31, 2027 – October 30, 2029.

Select if the application is a resubmission or not. Applications that represent resubmission of previously proposed studies, in whole or in part, may be submitted for consideration only twice; however, there is no restriction on the timing of the resubmissions. A one-page letter referencing the project title and a summary of changes to the application from the previous submission, plus a one-page response to reviewers' criticisms must be uploaded as an attachment during Step 12: Upload Attachments.

Step 1a: Enable Other Users to Access This Proposal

You have the option to allow other individuals access to your application. You can choose from three different levels of permission.

Step 2: Applicant/PI

Profile information is pre-loaded in this section. You may update your profile information here as well.

Step 3: Additional Applicant/PI Information

Additional applicant/PI information is requested in this section. All answers for this step are optional. This information will only be used for internal MRF purposes.

Step 4: Institution and Contacts

Institution information and contact information can be updated and/or changed here.

Step 5: Key Personnel

Key personnel, other than the applicant, who will provide support to the project will be listed here. Please list the mentor(s) in this section. A NIH Biosketch and Other Support Page (both active and pending) for the PI/co-PI and all Mentors will be required to be uploaded in section 7. The Other Support page must include information about all types of available research support (including direct costs and percent effort). Please note: with respect to the Other Support for CDA applications, there should be no funding overlap between the applicant's proposed project and the mentor's funded research.

Step 6: Abstract/Grant Information

Answer the required questions on this page by selecting the options that best describe your proposed project. Instructions are available in the blue banners above each question.

***Mucosal Melanoma CDA Applicants Only**

The question "Please explain how your project is specific to mucosal melanoma" is required for Mucosal Melanoma CDA applicants only. Other applicants may skip this question or write "N/A."

Step 7: Upload Attachments

All attachments must be in PDF form. Uploaded documents should fall under one of the following descriptions:

- **Letter of Intent** - 1-page maximum, Arial font, at least 11pt font with ½ inch margins; single line spacing is acceptable. LOIs exceeding 1 page will be disqualified. The LOI must include the following sections:
 - Background and rationale for the study.
 - Specific Aims. Please note - If invited to submit a full proposal, any specific aims that differ substantially from those outlined in the LOI will result in disqualification.
 - Experimental design and procedures.
 - Brief description of PI qualifications, key collaborators, and collaboration.
 - Significance and impact of the proposed study.
- **References and Abbreviations** - Lists of references, abbreviations, acronyms and symbols (1-page limit).
- **Biosketch** - A NIH Biosketch for the PI/co-PI and all mentors is required to be uploaded. Applicants should use the NIH [Biosketch Common Form](#).
- **Other Support** – A NIH [Current and Pending \(Other\) Support](#) form is required for the PI, co-PI (if any), and mentor. The Other Support page must include information about all types of available research support (including direct costs and percent effort). Please note: with respect to the Other Support for the CDA applications, there should be no funding overlap between the applicant's proposed project and the mentor's funded research.

Step 8: Validate

Click the 'Validate' button here to check for any missing required information or files. All missing

required information will be listed on the screen. Please correct any missing information before proceeding to the next step.

Step 9: Signature Page(s)

You may print the signature page(s) after you have completed all the proposal sections. Only signature from the applicant is required at the LOI stage.

Step 10: Submit

Submit your application. You will be unable to submit if you have not provided all the required information. We encourage you to submit your application as early as possible so that we can assist you if any issues arise. **The deadline is November 13, 2026 at 11:59 PM ET.**

STEP-BY-STEP APPLICATION INSTRUCTIONS - Full Application:

Only applicants who have been invited to submit a full application may do so. The MRF will accept full applications until March 31, 2027 at 11:59 PM ET. All submissions, notifications and critiques will be completed entirely online through ProposalCentral (<https://proposalcentral.altum.com/>).

Please read the instructions carefully prior to beginning the online grant submission process.

Step 1: Title Page

The project title should not exceed the space provided (75 characters, including spaces).

Choose the grant program, from the list noted below, to which you are applying:

- Career Development Awards (CDA) – up to \$100,000 over a two-year period
- Mucosal Melanoma CDA – up to \$100,000 over a two-year period

The research period is for two years. The award period is October 31, 2027 – October 30, 2029.

Please select if the application is a resubmission or not. Applications that represent resubmission of previously proposed studies, in whole or in part, may be submitted for consideration only twice; however, there is no restriction on the timing of the resubmissions. A one-page letter referencing the project title and a summary of changes to the application from the previous submission, plus a one-page response to reviewers' criticisms must be uploaded as an attachment during Step 12: Upload Attachments.

Step 1a: Enable Other Users to Access This Proposal

You have the option to allow other individuals access to your application. You can choose from three different levels of permission.

Step 2: Applicant/PI

Profile information is pre-loaded in this section. You may update your profile information here as well.

Step 3: Additional Applicant/PI Information

Additional applicant/PI information is requested in this section. All answers for this step are optional. This information will only be used for internal MRF purposes.

Step 4: Institution and Contacts

Institution information and contact information can be updated and/or changed here. Institution Signing Official and Financial Officer contacts are required.

Step 5: Key Personnel

Key personnel, other than the applicant, who will provide support to the project will be listed here. For the Career Development Award (CDA), the PI/ co-PIs must list their mentor(s) in this section. A NIH Biosketch and Other Support Page (both active and pending) for the PI/co-PI and all Mentors will be required to be uploaded in section 12.

Step 6: Environment

Please provide a description of your institutional environment in which the research will be conducted. Please describe how this environment will contribute to the probability of success (e.g. institutional support, physical resources including laboratory, office space and common use facilities contributing to the proposed work, etc.). For all CDA applications, please also provide an overview of the institutional investment in the success of the investigator (e.g. travel, training, collegial support including the availability of organized peer groups, logistical support such as administrative management/oversight and financial support such as protected time for research with salary support) as well as a description of your career goals/ objectives including any career development/training activities that will occur during the grant period. The total length of this section may not exceed 3,000 characters (including spaces).

Step 7: Abstracts

***Mucosal Melanoma CDA Applicants Only**

The question "Please explain how your project is specific to mucosal melanoma" is required for Mucosal Melanoma CDA applicants only. Other applicants may skip this question or write "N/A."

Scientific Abstract

In the space provided, include a summary of the proposal that gives a brief description of the objectives, rationale, methods and expected results. The total length of the summary may not exceed 3,000 characters (including spaces) and should be written in scientific terms.

Lay Abstract

In the space provided, include a brief (<3,000 characters, including spaces) summary of the proposal. The lay level abstract needs to be written so that the everyday person can understand the significance, impact and innovation of the proposed research.

Summary Quote

In 100 characters or less, please provide up to two sentences that describes the impact of your research on the melanoma community. As this will be used for promotional purposes, please write this so that the lay community can understand.

*Mucosal Melanoma CDA Applicants only: the question "Please explain how your project is specific to mucosal melanoma" is required.

Keywords

Please select up to six appropriate keywords (from the list provided) that characterize the proposed research project.

If the project is awarded, portions of the abstracts may be used in the MRF's various publications, press releases, fundraisers, and educational events.

Category

Please make one selection for each category that best describes your research proposal.

Special Topic Proposals (STPs)

If applicable, please select appropriate STPs (from the list provided) that characterize the proposed research project.

Step 8: Budget Period Detail

Awards will be made over a two-year period. Please fill out the budget information for **both years**. Please note that for **all grants**: Only **direct** costs are allowed.

Personnel Costs

- Cost of living adjustments for personnel or non-personnel costs are not allowed.
- When calculating salaries, please use actual costs – not the salary allowed by the NIH salary cap. The salary and fringe benefits included in the budget is calculated based on total of salary and fringe benefits multiplied by the % effort. Salary distribution of supporting personnel is up to the discretion of the PI.
- No more than 25% of the grant should go towards the salaries plus fringe benefits of the PI or co-PI.

Non-Personnel Costs

- All budgeted expenses such as consumable supplies, animal costs, service fees and consultant fees must be itemized.
- Requests for major equipment will be closely scrutinized, should be carefully justified, and should not exceed 15% of the total (two year) budget.
- Indirect institutional costs are not allowed.
- Allowable travel expenses for meetings and research purposes – including to international meetings – are capped at \$2,000 per project year.

Step 9: Budget Summary

This is a summary of the Budget Period Detail. Also, please give a brief justification for each budget item here.

Step 10: Organization Assurances

Information regarding human subjects, vertebrate animals, and/or recombinant DNA will be entered here (if relevant). If an application has just been submitted, please note that as well.

Step 11: Upload Attachments

All attachments must be in PDF form. Uploaded documents should fall under one of the following descriptions:

Letter of Support – A letter of support from your institution is required; additional letters of support are allowed. This letter should be from the department chair or other leader at the institution with direct knowledge of the applicant's value to the department and institution. A research laboratory head may write a letter of support for a postdoctoral fellow applicant; however, for all other applicants, it is anticipated that the letter of support will come from a departmental chair or other institutional leader.

Biosketch - A NIH Biosketch for the PI/co-PI and all mentors is required to be uploaded. Applicants should use the NIH [Biosketch Common Form](#).

Other Support - A NIH [Current and Pending \(Other\) Support](#) form is required for the PI, co-PI (if any), and mentor. The Other Support page must include information about all types of available research support (including direct costs and percent effort). Please note: with respect to the Other Support for the CDA applications, there should be no funding overlap between the applicant's proposed project and the mentor's funded research.

Data Management and Sharing Plan- A Data Management and Sharing Plan using the NIH DMS Plan format is required to be uploaded. Information on the format page is available via this [link](#).

Resubmission Information

If the application is a resubmission of a previously proposed study, a summary of changes to the application from the previous submission (up to 1-page in length), and responses to reviewers' criticisms (up to 1-page in length) must be uploaded here.

Research Plan

The research plan is limited to **6 pages, Arial font, at least 11pt font with ½ inch margins**; single line spacing is acceptable. The text of the Research Plan should contain sufficient information for the evaluation by the reviewer panel and should cover:

- Specific Aims (if the application addresses one or more STP, please cite the topic) – Please note that any specific aims that differ substantially from those outlined in the LOI will result in disqualification.
- Background, rationale and significance.
- Preliminary Data: results of previous research related to the Project Title. Specify how the original research objectives have been met and include justification of support based on exceptional findings. If the original research objectives were not met or were modified, an explanation must be included.
- Experimental design and procedures
- References (References ARE NOT counted in the page limit)

Step 12: Validate

Click the 'Validate' button here to check for any missing required information or files. All missing required information will be listed on the screen. Please correct any missing information before proceeding to the next step.

Step 13: Signature Page(s)

You may print the signature page(s) after you have completed all the proposal sections. Signatures from the applicant and Signing Official are required.

Step 14: Submit

Submit your application. You will be unable to submit if you have not provided all the required information. We encourage you to submit your application as early as possible so that we can assist you with any issues that may arise. **The deadline is March 31, 2027 at 11:59 PM ET.**

FREQUENTLY ASKED QUESTIONS:

How do I apply for a grant?

The grant application will be available ONLY during the time applications are being accepted. During that time, you can apply for a research grant online at <http://proposalcentral.altum.com/>.

What is the deadline?

Applications will be accepted until **November 13, 2026 at 11:59 PM ET** for the LOI and **March 31, 2027 at 11:59 PM ET** for the full application.

Do I need to be a U.S. citizen?

No. However, the proposed research must be conducted in a non-profit research organization, a medical institution or an educational institution located in the United States.

Am I eligible?

Please read all eligibility requirements. Should you have questions not answered here, please contact the MRF at research@melanoma.org.

How long is the research plan section of the grant?

The LOI is limited to 1-page. For the full application, the research plan is limited to 6 pages, not including references.

What information is included in the project plan?

The text of the research plan should contain sufficient information for evaluation by the review panel. The plan should cover specific aims, background, rationale, significance, results of previous research directly related to the project title, experimental design and procedures and references. Please note: If the application is in response to a STP, the background section could be streamlined as the reviewers already realize the relevance/significance of the research.

Can an award be transferred to a new institution?

A grant can be transferred upon approval by the MRF. The MRF envisions that for postdoctoral fellow CDA Awardees, who may be transitioning to independent faculty positions, this may be a common occurrence. For detailed criteria and instructions, please contact the MRF at research@melanoma.org.

Term	Definition
Key Personnel	The PI and other individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they receive salaries or compensation under the grant. Typically, these individuals have doctoral or other professional degrees, although individuals at the masters or baccalaureate level may be considered key personnel if their involvement meets this definition. Consultants also may be considered key personnel if they meet this definition.
Principal Investigator (PI)	This is the grantee responsible for all activity being supported by the grant. He or she is responsible and accountable to the MRF for the proper conduct of the project or activity.

Other Support	Includes all financial resources, whether Federal, non-Federal, commercial or organizational, available in direct support of an individual's research endeavors, including, but not limited to, research grants, cooperative agreements, contracts or organizational awards. Other support does not include training awards, start-up funds, prizes or gifts.
Institutional Animal Care & Use Committee (IACUC)	Established at institutions in accordance with the PHS Policy on Humane Care and Use of Laboratory Animals with broad responsibilities to oversee and evaluate the institutions' animal programs, procedures and facilities. IACUC review and approval is required for all PHS supported activities involving live vertebrate animals prior to funding.
Institutional Review Board (IRB)	IRBs are set up by research institutions to ensure the protection of rights and welfare of human research subjects participating in research conducted under modifications in or disapprove research protocols based on whether human subjects are adequately protected, as required by federal regulations and local institutional policy.
Clinical Trial	A biomedical or behavioral research study of human subjects designed to answer specific questions about biomedical or behavioral interventions (drugs, treatments, devices, or new ways of using known drugs, treatments, or devices). Clinical trials are used to determine whether new biomedical or behavioral interventions are safe, efficacious, and effective. Clinical trials of an experimental drug, treatment, device, or intervention may proceed through four phases: Phase I: Testing in a small group of people (e.g. 20-80) to determine and evaluate safety (e.g. determines a safe dosage range and identify side effects). Phase II: Study in a larger group of people (several hundred) to determine efficacy and further evaluate safety. Phase III: Study to determine efficacy in large groups of people (from several hundred to several thousands) by comparing the intervention to other standard or experimental interventions, to monitor adverse effects, and to collect information to allow safe use. Phase IV: Study done after the intervention has been marketed. These studies are designed to monitor the effectiveness of the approved intervention in the general population and to collect information about any adverse effects associated with widespread use.

Visit www.melanoma.org for additional information on the MRF and to learn more about previously funded research. All questions or concerns regarding the MRF's Research Grant Program can be directed to research@melanoma.org.