completing this form. An agency may not conduct

reduce his/her effort from 40 percent to 30

PHS Grants Policy Statement. Line drawings of the proposed alterations should be submitted with the application where required by the PHS Grants Policy Statement. When submitting Progress Reports for program project grants, center grants, education grants, or other large multicomponent grants, contact the program official in the awarding component for specific instructions.

The entire Progress Report for regular projects, exclusive of the list of publications, **should not exceed two pages.** The report should follow the outline and numbering system shown below. Continuation pages may be used as necessary.

a. Specific Aims

Becatin of Scientific Review Group (SRG)

Provide **one copy** of each publication not previously submitted to the awarding component. **Report only those publications resulting directly from this grant.** If there have been no publications, so state.

f. Project-Generated Resources

If the research supported by this grant resulted in data, research materials (such as cell lines, DNA probes, animal models), protocols, software, or other information available to be shared with other investigators, describe the resource and how it may be accessed.

Gender and Minority Inclusion Table

Inclusion of Gender and Minority Study Subjects. Summarize the study population of the project as actually awarded in terms of sample size and inclusion of participants by gender and ethnic minorities, using Form Page 5.

Provide the number of participants by gender and ethnic minorities enrolled in the study **to date** (cumulatively since the most recent competitive award), using the table on Form Page 5, according to the categories below.

If there is more than one study, provide a separate table for each study. Also report on the subpopulations included in the study.

7. Checklist (Form Page 6)

Assurances/Certifications

Each application to the PHS requires that the following assurances and certifications be verified by the signature of the Official Signing for Applicant Organization on the Face Page of the application. Definitions are provided in the *Grants Policy Statement* and in the PHS 398 application instructions. If unable to certify compliance where applicable, provide an explanation and place it after the Progress Report (Form Page 5).

Human Subjects
Vertebrate Animals
Debarment and Suspension
Lobbying
Delinquent Federal Debt
Research Misconduct
Civil Rights
Handicapped Individuals
Sex Discrimination
Age Discrimination
Financial Conflict of Interest

Program Income: See the PHS 398 application instructions and the *Grants Policy Statement* for information on program income. If no program income is anticipated during the period(s) for which grant support is requested, no other action is necessary.

If program income is anticipated, use the format provided. If the application is funded, the Notice

(DHHS) and outside the Agency to the public, as required by the Freedom of Information Act and the associated DHHS regulations (45 CFR 5), including: Congress acting within its legislative authority; the National Archives;

2. Next Budget Period (Form Page 2)

Use the NRSA substitute budget page, and follow the instructions below, to request direct costs for the next budget period. Any additional information should be provided on Form Page 3.

Stipends

Enter the number of trainees and stipend amount for each trainee. Identify, by name, all trainees to be continued and new trainees to whom a commitment has been made for the next budget period.

Tuition, Fees, and Insurance

Itemize tuition, individual fees, and **self-only** medical insurance. If tuition varies, e.g., in-state, out-of-state, or student status, identify these separately. Tuition at the postdoctoral level is limited to that required for specified courses. Tuition, fees, and self-only medical insurance

of the position, and any other relevant information.

At the bottom of this page, summarize information on the gender and racial/ ethnic distribution of the trainees supported on this grant during the reporting period.

CONSULTANT COSTS

EQUIPMENT

GRANT NUMBER	
OTO WAT INDIVIDEN	

	GRANT NUMBER	

PHS 2590 (Rev. 4/98)

GRANT NUMBER

CHECKLIST

1. ASSURANCES/CERTIFICATIONS (See Instructions, Page 10)

The following assurances/certifications are made and verified by the signature of the OFFICIAL SIGNING FOR APPLICANT ORGANIZATION on the FACE PAGE of the application. If unable to certify compliance where applicable, provide an explanation and place it after this page.

 $\ddot{\text{Y}}$ Human Subjects; $\ddot{\text{Y}}$ Vertebrate Animals; $\ddot{\text{Y}}$ Debarment and Suspension; $\ddot{\text{Y}}$ Lobbying; $\ddot{\text{Y}}$ Delinquent Federal Debt; $\ddot{\text{Y}}$ Research Misconduct; $\ddot{\text{Y}}$ Civil

PERSONNEL REPORT	GRANT NUMBER