

This FAQ is provided as a resource to assist with the process of applying for the 2026 ICTR Translational Basic & Clinical Research (TBCR) Pilot Award. **Please refer to the 2026 TBCR Request for Proposal (RFA) for full details about eligibility, review criteria, and application deadlines and processes.**

Q1: What is the goal of ICTR Research Pilot Award funding?

Pilot awards are generally intended to fund activities related to collecting preliminary data and other evidence that will support future work that is funded by larger, extramural awards.

Successful proposals will clearly describe how the pilot data collected as a part of this award will be used to seek further extramural funding in support of a research career trajectory.

<https://www.nccih.nih.gov/grants/pilot-studies-common-uses-and-misuses>

Q2: What are the differences between the ATRS and TBCR Pilot Awards?

There are several key differences between these two awards. Investigators should review each RFA carefully to decide which mechanism is the right fit for their proposal. Both mechanisms focus on translational research as a key element of proposed projects. The main differences include (but are not limited to):

ATRS awards are federally funded, has a firm 12-month period, and must go through a prior approval process with NCATS. These projects must address a specific clinical and translational research question and be generalizable. Projects must be focused on translational science; turning a translational obstacle or roadblock into a research question.

TBCR awards are funded by ICTR, and may be eligible for no-cost extensions (where appropriately justified). These projects must be lead by Co-PIs with interdisciplinary partnership, and may include research with human participants and/or novel methods.

Neither mechanism is intended for clinical trial-type designs with multiple arms.

Q3: Can I submit concurrent applications to the ATRS and TBCR Pilot Awards?

No. While both mechanisms support pilot-level projects, the requirements are different. Please review both RFAs and determine which is a better fit to your proposed aims.

Q4: Who funds this award?

These awards are funded by ICTR. Co-funding from PI or Co-PI departments may be applicable.

Q5: What types of proposals are prioritized for funding?

Proposals responsive to this specific RFA must involve:

1. Clinical research projects that define and develop novel clinical interventions, OR
2. Translational aspects of research incorporated into an investigator-initiated project, OR
3. Projects that address contemporary and/or emerging health crises

Q6: What qualifies as an “interdisciplinary partnership?”

It is ultimately the responsibility of the Investigators to adequately describe how the Contact PI and Co-PI complement each other’s experience, skills, and/or approaches to the benefit of the proposed work. For example, PIs may have appointments in the same department, as long as the interdisciplinary nature of the complementary approaches is compelling.

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Q7: Can my Co-PI have an appointment at Marshfield Clinic?

Yes. The Contact PI must have an eligible appointment at UW-Madison, but a Co-PI may have an appointment at Marshfield Clinic.

Q8: What's the difference between Translational Science and Translational Research?

Translational Research is the *application* of discoveries (from laboratory, clinic, or community) to create tangible health interventions—turning observations into diagnostics, therapies, and practices.

Translational Science is the *field of investigation* that seeks to understand and improve the *process* of translation itself—examining the scientific and operational principles that enable these discoveries to move more efficiently and effectively into real-world use.

Q9: Is a project that proposes a novel application of an existing method fundable through this mechanism?

Potentially. A proposal that applies an existing method in a new and innovative way *could* be considered fundable if it directly addresses the requirements of the RFA (see Q5).

Q10: What is an example of a translational barrier?

You must clearly identify a specific translational barrier in your proposal. Examples cited in the literature and by other CTSA programs include:

- Ineffective clinical trial recruitment and/or failure/inability to retain participants
- Complexity of study protocols/complexity of managing multi-site studies effectively/ protocols and intervention not completed on time or within budget
- Translation of effective health interventions between patient populations, geographic areas, demographic differences
- Failure in translation of animal models to human trials, failure to correctly predict drug toxicology or efficacy, lack of valid predictive biomarkers
- Challenges in testing new therapeutic modalities and drug repurposing
- Barriers to data acquisition, integrity, and analysis
- Lack of data interoperability and transparency
- Failure to technically, consistently, and realistically execute complex mechanistic studies in human or animal models
- Lengthy regulatory approval processes at multiple levels of the ecosystem
- Lack of novel endpoints for clinical studies that measure health impact and equity across diverse populations

See the RFA for more examples.

Q11: What do I need to do before I can apply?

A Letter of Intent must be submitted on or before January 27, 2026, 11pm CT. Once PI eligibility and responsiveness to the RFA have been established, prospective applicants will be invited to submit a full proposal and provided with a link to make their full submission.

See the RFA for a detailed description of the required elements.

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Q12: How is the full application submitted?

The full application is submitted via REDCap, and includes:

- A form for the collection of academic and demographic information
- A place to upload the budget and justification, using the provided template
- A place to upload all applications sections, combined into one PDF

See the RFA for a detailed description of the required elements.

Q13: Do I need IRB/IACUC approval before I submit my application?

No. But you will need the relevant IACUC approval or IRB approval or confirmation of exemption before beginning work with animals or humans.

Q14: How will proposals be evaluated for scientific merit?

Each full application will be evaluated by at least two independent peer reviewers using the Simplified Framework for NIH Peer Review. Scientific merit will be determined by averaging the Overall Impact scores from each independent peer reviewer. Meritorious applications will then be evaluated and ranked by an ICTR Scientific Review Group (SRG). The SRG may request further clarification and/or modifications.

The Simplified Framework for NIH Peer Review Criteria retains the five regulatory criteria (Significance, Investigators, Innovation, Approach, Environment) but reorganizes them into three factors; two will receive numerical criterion scores and one will be evaluated for sufficiency. All three factors will be considered in arriving at the Overall Impact score. The reframing of the criteria serves to focus reviewers on three central questions reviewers should be evaluating: How important is the proposed research, how rigorous and feasible are the methods, and whether the investigators and institution have the expertise/resources necessary to carry out the project.

<https://grants.nih.gov/policy-and-compliance/policy-topics/peer-review/simplifying-review>

Q15: Are no-cost extensions allowed?

Yes. No-cost extensions must be requested and approved by ICTR and any co-funding entity, if applicable. One no-cost extension, with appropriate justification is allowed. The time period of a proposed no-cost extension will be determined at the time of the request.

Q16: Will this award be offered again?

Yes. ICTR releases this RFA annually.

Other Pilot Award RFAs are released throughout the year. To see a complete list of ICTR funding opportunities, see: <https://ictr.wisc.edu/funding>

Q17: What happened to the Novel Methods award that was previously offered?

The ICTR Novel Methods award has been replaced by this Advancing Translational Research & Science (ATRS) Pilot Award.

Q18: I have questions that were not addressed in this document, who can I talk to about my proposal?

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