|  |  |
| --- | --- |
| Submitter’s Name: | Submitter’s Email: |
| PI Name: | PI Email: |
| Institution: | Submitter’s Department: |
| Institution Address: |
| Grant Title:  | Grant Submission Number:  |
| Granting Agency: |

**Requesting Grant Support**

**Are you applying for a new grant or renewing a previous one?**

* + New grant application
	+ Renewal application

**Type of Research**: (fill in the blank of this statement):

We offer multiple sequencing platforms to assist with the genetic and genomic components of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (TYPE OF RESEARCH STUDY IE: Cancer, Clinical, etc) research.

**Has the HTSF supported past grant applications/research?**

* + No
	+ Yes

**If yes…**please list relevant past support:

**Brief Study Statement:**