

The **Chao Family Comprehensive Cancer Center (CFCCC)** funded by the **Anti-Cancer Challenge (ACC)** is accepting applications for cancer-related pilot projects.

The overall objectives of the CFCCC Pilot Awards Program are to: (1) increase the number of extramural peer-reviewed grant awards, particularly collaborative and multi-PI grants; (2) support the development of investigator-initiated early phase clinical trial protocols by clinical investigators, particularly interventional trials; (3) advance novel diagnostic or screening technologies, therapeutic molecules or devices, and bio-behavioral interventions from bench to bedside; and (4) advance research on cancer control, cancer population science, and pediatric cancers.

**KEY DATES**

- Applications Due: March 20, 2026 (5:00 pm PST)
- Scientific Merit Review: May 2026
- Notifications of Award: June/July 2026
- Earliest Funding Start Date: July 15, 2026

**ELIGIBILITY**

- Principal Investigators (PIs) must be UCI investigators or researchers in an **independent faculty position** (e.g., In line, In Residence, Assistant, Adjunct, Clinical-X, Clinical and Researcher), CHOC Hyundai Cancer Institute-affiliated physicians, or collaborators at the Long Beach VA Medical Center. Eligibility questions, contact [CFCCCPilots@hs.uci.edu](mailto:CFCCCPilots@hs.uci.edu).
- The PI of the award must be a CFCCC Member or Associate Member at the time of award.
- Projects must be capable of significant impact within 1-2 years.

**AWARDS**

Applicants may apply to one of these four distinct opportunities. **Investigators may only submit one application as a PI.**

EARLY-STAGE INVESTIGATOR AWARD \$20,000	STANDARD AWARD UP TO \$50,000
<p>This opportunity provides support for early-stage investigators.</p> <p>The PI must meet the basic eligibility requirements and be an early-stage investigator (ESI) as defined by <a href="#">NIH</a>: Must have completed their terminal research degree or end of post-graduate clinical training, whichever is later, within the last 10 years</p> <p>Must not have served or be serving as PI for a substantial NIH independent research award (R-, P-, or U-level)</p>	<p>This opportunity provides support for investigators at all levels.</p> <p>The PI must meet the basic eligibility requirements.</p>
MULTI-PI (TEAM SCIENCE) AWARD \$60,000	RE-ENTRY AFTER DEPENDENT CARE AWARD \$40,000
<p>This important opportunity provides support for activities that require a team science approach. The goal is to encourage collaboration among equals and preparation of competitive applications for larger extramural awards.</p> <p>The PIs must meet the basic eligibility requirements, demonstrate shared responsibility and authority for leading the project, and identify the extramural award application the proposed research will support.</p> <p>Applicants are encouraged to contact CFCCC prior to submission to discuss the appropriateness of their proposed research for this opportunity.</p>	<p>This opportunity provides support for investigators whose research has been interrupted for at least 6 months by significant but temporary dependent care responsibilities (e.g., childbirth; childbearing complications; child-rearing; caring for an ill, disabled, or elderly dependent).</p> <p>Funds are meant to provide support for ongoing research and assist with addressing gaps in research productivity (e.g., obtaining preliminary data for grant submission).</p> <p>Applicants must demonstrate a compelling need that is related to research activity interruption due to caregiving responsibilities and are expected to describe the caregiving burden and impact of this caregiving on capacity to conduct research and/or financially support their research program.</p>

## RESEARCH SCOPE

Applicants may request one year (Track 1) or two years (Track 2) of support.

TRACK 1 Limited to 1 year	TRACK 2 Limited to 2 years
<ul style="list-style-type: none"><li>• Basic, translational, or population-based cancer science projects</li><li>• Expected to generate pilot data necessary for obtaining peer-reviewed extramural grants (e.g., NIH R01) or enable additional data collection to respond to prior critiques for resubmission applications (NIH A1 applications)</li><li>• For proposals testing comparisons between groups (cell lines, mice, patients, etc.) or hypotheses, the proposal <i>should</i> include an analysis plan (can be brief) and power calculation justifying the sample size and showing that meaningful results could be obtained.</li><li>• Recommend including a calculation(s) of sample size and statistical power, if appropriate (Contact: BSR <a href="#">service request</a>)</li></ul>	<ul style="list-style-type: none"><li>• Early Phase Clinical Research, with the goal of launching an interventional investigator-initiated clinical trial at UCI Health within 1 year.</li><li>• Recommend including a calculation(s) of sample size and statistical power within the proposal. (Contact: BSR <a href="#">service request</a>)</li><li>• Not necessarily expected to lead to extramural peer-reviewed funding, but pharmaceutical industry co-sponsorship is encouraged when appropriate</li><li>• Projects must be managed by the <a href="#">Stern Center for Cancer Clinical Trials &amp; Research</a> including budget and study coordination, and must meet the following criteria:<ul style="list-style-type: none"><li>○ Developed in collaboration with a CFCCC Disease-Oriented Team or a multidisciplinary tumor board</li><li>○ Include a DOT-approved clinical protocol</li><li>○ <b>Capable of obtaining full regulatory approval (e.g., IRB) within 6 months of award</b></li></ul></li><li>• Contact Stern Center Business Unit at <a href="mailto:sternbusinessunit@hs.uci.edu">sternbusinessunit@hs.uci.edu</a></li></ul>

### PRIORITY AREAS (based on the four Center-Wide Trans-Center Themes in the new CFCCC Strategic Plan)

- **Personalized Cancer Medicine** (encompassing precision oncology, immuno-oncology, and early phase clinical trials). This includes research addressing:
  - Tumor- and patient-specific diagnostics, therapeutics, or biomarkers (e.g., genomic, epigenomic, proteomic, immunologic)
  - Immuno-oncology and novel cellular or molecular therapies
  - Early-phase and investigator-initiated clinical trials with strong potential to progress to next-phase studies, multi-site trials (e.g., UC Consortium), or national networks (e.g., NCTN)
  - Projects leveraging Disease-Oriented Teams (DOTs), molecular tumor boards, or CFCCC Shared Resources to accelerate translation from bench to bedside
- **Physical Oncology Sciences** (emphasizing imaging, biomedical engineering, nanomedicine, and chemical /structural biology). This includes research addressing:
  - Novel diagnostic, imaging, or screening technologies
  - Therapeutic devices or delivery platforms
  - Cross-disciplinary collaborations that bridge basic, translational, and clinical research
  - Studies that position innovative technologies for downstream clinical application or commercialization
- **Whole-Person Cancer Care and Survivorship** (integrative oncology). This includes research addressing:
  - Integrative oncology and supportive care interventions
  - Survivorship, rehabilitation, symptom management, or palliative care research
  - Interventions addressing psychosocial, behavioral, or functional outcomes
  - Studies that integrate clinical care with survivorship and supportive services
  - Pediatric and Adolescent/Young Adult (AYA) survivorship and supportive care needs
- **Community Cancer Research, Prevention and Care** (alleviating the cancer burden in OC as the safety net healthcare provider). This includes research addressing:
  - Cancer prevention, screening, and early detection interventions addressing cancers and populations reflecting OC burden (e.g., melanoma; liver and gastric cancer in Hispanics and Asians; cervical cancer; young-onset colorectal cancer)
  - Catchment area-relevant cancer control and population science informed by bidirectional community engagement and partnerships ensuring alignment with local needs and priorities

- o Community-engaged and implementation research approaches that improve reach, uptake, and sustainability of evidence-based cancer prevention, screening, and care
- o Projects leveraging safety-net and community care settings, including Federally Qualified Health Centers and Medi-Cal/CalOptima—serving populations, to improve access, screening & prevention, and outcomes
- o Integrated population, community, and clinical research designed to produce measurable improvements across the cancer continuum, including prevention, treatment, survivorship, and supportive care
- o Learn more about:
  - [Cancer health disparities](#)
  - [CFCCC catchment area and Catchment area dashboard](#)
  - [Catchment area demographics and cancer incidence and mortality](#)
  - [Demographic Characteristics and Social Determinants of Health](#)

**APPLICATION GUIDELINES**

**A. Contact for inquires:** [cfcccpilots@hs.uci.edu](mailto:cfcccpilots@hs.uci.edu)

**B. Application Components**

**a. Full Application** (Due March 20, 2026 by 5:00 pm PST)

- A complete application will include these components.
  - i. Project Detail Cover Sheet ([online form](#))
  - ii. Research Proposal ([downloadable template](#))
    - Scientific Abstract
    - Community Relevance Statement
    - Research Strategy (limited to 3 pages)
    - Leadership Plan (for multi-PI applications)
    - Bibliography/References Cited
    - Detailed Budget & Budget Justification
  - iii. NIH-formatted Biosketches for Key Personnel
- Download the proposal template and submit your complete application through this online form: [CFCCC Pilot Application Form](#)

**C. Budgets**

- Unallowable costs: PI salaries (salaries for project staff are allowable), large equipment (e.g., >\$5K), travel, and indirect costs.
- Funding from the Anti-Cancer Challenge are gift funds, no indirect costs will be awarded.
- Funds must be fully spent within the award period.
- Co-funding is allowable and may be described in the application. However, co-funding is not required.
- Early Phase Clinical Research (Track 2) must be managed by the Stern Center for Cancer Clinical Trials & Research. Contact Stern Center Business Unit at [sternbusinessunit@hs.uci.edu](mailto:sternbusinessunit@hs.uci.edu)

**D. Review Criteria**

EARLY-STAGE INVESTIGATOR AWARD \$20,000	STANDARD AWARD UP TO \$50,000
Standard Award review criteria apply. ESI applications will be reviewed in a separate pool. In addition, peer reviewers are instructed to focus more on the proposed approach than on track record, and to expect less preliminary data than would be provided by established investigators.	Applications will be peer reviewed in accordance with NIH's scoring system with explicit emphasis placed on the near-term impact (i.e., within 1-2 years). Applicants will receive a copy of the review comments in an anonymous format. Projects that address one or more of the priority areas will be scored more favorably. Projects that extend basic science to a clinical or translational capacity, leverage <a href="#">CFCCC Shared Resources</a> , collaborate with <a href="#">DOTs</a> , or involve significant new collaborations will be ranked more favorably. Inter/intra-programmatic collaboration between Cancer Center members are strongly encouraged.
MULTI-PI (TEAM SCIENCE) AWARD \$60,000	RE-ENTRY AFTER DEPENDENT CARE AWARD \$40,000

<p>Standard Award review criteria apply.</p> <p>In addition, peer reviewers are instructed to evaluate whether the scientific goals of the project justify a multi-PI (team science) approach. As with NIH P01 applications, it is expected that the multiple components of the applications are stronger together than if submitted separately.</p>	<p>Standard Award review criteria apply.</p>
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**E. Regulatory Approvals**

Prior to the release of funding:

- All projects involving human subjects must have IRB approval. If sufficient progress in obtaining regulatory approvals has not been made within 6 months after award date, the CFCCC may withdraw funding.
- All projects involving animal subjects must have the appropriate IACUC approvals.
- All projects involving biohazards and subject to review by the IBC must have those approvals in place.

**F. Reporting**

- As a requirement of federal and philanthropic funding, Cancer Center Administration will track the outcomes of each award through annual progress and impact reports to determine the return on investment. Portions of a report or the report as a whole may be shared with the community or donors upon request.
  - Progress Reports: Due 12 months (Track 1) or 24 months (Track 2) from the start date of the award.
  - Impact Reports: Due annually for a period of 5 years after the project end date.
- Awardees may be asked or have the option to present a 15-20 minute “chalk talk” to a peer-colleague committee at the CFCCC Annual Scientific Retreat held in September of each year. Chalk talks are intended to help grantees prepare for extramural research grant submissions.

**G. Donor Engagement**

- Awardees will be asked to present at Anti-Cancer Challenge-related events and participate in video projects to help share the importance of supporting cancer-related pilot projects and the impact of ACC within the community.