## Applicant Organization \*

## (i) Instruction:

**Provide the following information about the applicant organization.** Include the formal legal name of the organization that, if awarded, will receive grant funds. *If more than one organization intends to apply for funding, please provide information for only one organization at this time.* 

**Note:** If the Applicant Organization is a college or university, include the appropriate School, Department or Unit.

You may use the "Select organization information" link below to facilitate the entry of data required below. If the information already exists in the GuideStar Exchange or from prior activity with RWJF, the fields below will become prepopulated with the required data. If that occurs, please be sure to proofread the prepopulated information to ensure that it is accurate and current. Feel free to edit as needed. Use this link to learn more about this feature. If, instead, you prefer to manually enter all the required information below, you may do so.

	* Indicates required
Applicant Organization*	
School/Department/Unit	
1.63	
Address*	
Address (line 2)	
City*	
State / Territory*	
Zip + 4-digit extension*	
Main Phone Number*	

Fax Number	
Web site	
web site	



## Project Director/Principal Investigator \*

## (i) Instruction:

- To save your partially completed page, scroll to the bottom of this page and select "Save, continue editing" or "Save, return home".
- If the Project Director/Principal Investigator's organization is a college or university, include the appropriate School, Department or Unit.

You may use the "Select contact information" link below to facilitate the entry of data required below. If the information already exists in the GuideStar Exchange or from prior activity with RWJF, the fields below will become prepopulated with the required data. If that occurs, please be sure to proofread the prepopulated information to ensure that it is accurate and current. Feel free to edit as needed. Use this link to learn more about this feature. If, instead, you prefer to manually enter all the required information below, you may do so.

## Project Director/Principal Investigator \*

This is the person with the responsibility for overseeing the project. This person will be the primary recipient of all key Foundation correspondence: copy of award notice, post-award financial and monitoring, and grant closure. If there is more than one project director/principal investigator, please provide information for only one at this time.

\* Indicates required

E-mail \*

Confirm E-mail \*

Prefix

First Name \*

Middle Name

Last Name \*

Degree(s)	
Organization *	
Position *	
School/Department/Unit	
Address *	
Address (line 2)	
City *	·
¥.6	
County *	
State / Territory *	
Zip or Postal Code *	
<b>V</b> ,0	
Office Phone Number *	
Phone Extn	
Cell Phone Number	

Fax I	Number			



## **Project Title and Summary Information**

### (i) Instruction:

Provide the following information specific to the proposed project.

- Project Title (maximum 150 characters)
- Requested Amount
- Proposed Start Date
- Duration
- Project Summary

**Note**: Due to the multi-phase nature of the *Pioneering Ideas* funding opportunity, projects are unlikely to start earlier than 16 weeks from date of brief proposal submission.

\* Indicates required

Project Title\*

Requested Amount \$\*

Proposed Start Date\*

Duration\*

months

#### **Project Summary \***

The Robert Wood Johnson Foundation seeks to discover, explore, and learn from novel ideas and emerging social, cultural, scientific, and technological trends. Through the Pioneering Ideas funding opportunity, we seek to engage pioneers in our work to build a Culture of Health in the United States and provide cutting-edge thinking that we can apply to the Foundation's four focus areas and the cross-cutting goal of achieving health equity.

Briefly describe your project, using the following questions as a guide:

#### WHAT

• What are the goals of the proposed work? Is there a hypothesis you seek to test or a problem your project will help solve?

#### HOW

- How would you use RWJF funding to accomplish these goals? What are the proposed project activities?
- How might your proposed project contribute to or fit into a larger vision for the future? How might your project, and the larger vision, inspire or inform progress toward a Culture of Health?
- How might your proposed project challenge conventional thinking and/or contribute new ideas to the Foundation's efforts to build a Culture of Health?
- · How will your proposed work address and advance health equity?

#### WHO

- Who is(are) the target audience(s) for your work?
- What key stakeholders will your proposed project impact or influence?
- What populations or communities are impacted by the problem you seek to address? How do/ will they inform your work?
- Who will contribute to this project (key partners or advisors)?

#### WHERE

• What locations (either specific places or types of places) are impacted by your proposed work?

#### NOVELTY/LEARNING POTENTIAL

- Whether or not your project proves successful, what might those seeking to build a Culture of Health in the United States expect to learn from your exploration?
- · How and to whom do you plan to disseminate the lessons learned from your project?

#### NON-RWIF FUNDING

• Have you received, or will you be receiving non-RWJF funding? If so, please include the amount and source of funding.

**Note**: You may **not** embed links to additional resources or include any attachments at this phase of the proposal process.

Please respond in the space below using a maximum of 7,500 characters, including spaces.



## **Project Information Questions\***

i Instruction:	
As appropriate, provide responses to the following questions.	
	ndicates required
1. Have you applied for RWJF funding in the past?*  Yes	
○ No	
<ul><li>2. Have you applied for RWJF funding through the Pioneering Ideas Brief Proopportunity in the past?*</li><li>Yes</li><li>No</li></ul>	posal funding
3. Which of the following BEST describes your organization?*  O Government entity	
State university	
O Not-for-profit that is tax exempt under IRC Section 501(c)(3)	
O Not-for-profit that is tax exempt under IRC Section 501(c)(4)	
O For-profit entity	
O Private foundation	
<ul><li>Type III supporting organization</li><li>Other (please specify)</li></ul>	
0.89	
4. How did you hear about the Pioneering Ideas Brief Proposal?*  Select all that apply.	
Conference	
Email	
Social media	
Website	
Word of mouth	
Other (please specify below)	

## **Brief Proposal Budget and Definitions \***

\* Indicates required

## (i) Instruction:

An important component of your brief proposal is the preparation of an initial budget. Please complete every field using your best judgment when projecting program expenses.

#### **Definitions**

- Personnel salary and fringe costs.
- Other Direct Costs office operations, communications/marketing, travel, meeting expenses and project space.
- Consultants/Contractors consultants and/or contract costs.
- Indirect Costs administrative expenses related to overall operations. The Foundation's approved rate for Indirect Costs is 12% of Personnel, Other Direct Costs and Consultants/Contractors. When Consultants/Contractors total more than 33% of the RWJF portion of a budget, the Foundation limits indirect costs on the Consultants/Contractors category to 4%.

Requested Budget

Amount

Personnel

Other Direct Costs

Consultants/Contractors

Indirect Costs