



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

REQUEST FOR APPLICATIONS
RFA R-26.2-ROTAA

Rural Oncology Trials Accelerator Award

**Please also refer to the Instructions for Applicants document, which will be
posted on August 5, 2025**

Application Receipt Opening Date: September 9, 2025

Application Receipt Closing Date: December 2, 2025

FY 2026

Fiscal Year Award Period

September 1, 2025-August 31, 2026

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RFA Version History

8/05/25 RFA release

1. BRIEF DESCRIPTION OF RFA

- The Rural Oncology Trials Accelerator Award (ROTAA) seeks to establish or enhance clinical trial capacity in rural and underserved communities in Texas **by providing seed funding for essential infrastructure, staffing, and operational support**. This Request for Applications (RFA) enables eligible sites to become trial ready and participate in industry or cooperative group-sponsored oncology clinical trials.
- The applicant must be a Texas-based entity. Any public or not-for-profit institution, health care system, community hospital or community oncology practice, critical access hospital, federally qualified health center, or safety-net provider in rural or medically underserved areas in Texas is eligible to apply for funding under this award mechanism. Texas Regional Excellence in Cancer Research (TREC)-eligible institutions are qualified and encouraged to apply. See the *Instructions for Applicants*, which will be released on August 5, 2025, for a list of TREC-eligible institutions.
- **Institutions are limited to one application submission in response to this RFA.**
- The Principal Investigator (PI) must have an MD, MD/PhD, DO, or equivalent medical degree, be licensed in Texas, and reside in the state at the time an award contract is made and for the duration of the award.
- Grant funds of up to \$900,000 (total costs) for the 3-year period may be requested for clinical trials infrastructure expenses, such as salary support for research coordinators and regulatory staff, equipment, eg, -70°C freezers, Electronic Medical Record (EMR) systems integration, clinical trials management systems, training, and expenses for partnerships with Site Management Organizations (SMOs) for turnkey startup services.
- Funds from this CPRIT award may not be used for salary support of the PI.
- Multi-Principal Investigators (MIs) are not allowed under this RFA. Note that CPRIT does not allow the use of the term Co-PI.
- The institution may submit both an application to this RFA and a new application to the Recruitment or Retention of Clinical Trialists Award during this fiscal year.
- Texas law requires that the institution must commit an amount of funds equal to one-half of the Cancer Prevention and Research Institute of Texas (CPRIT) funding dedicated to the research that is the subject of the award.

2. ABOUT CPRIT

The State of Texas has established CPRIT, which may issue up to \$6 billion in general obligation bonds to fund grants for cancer research and prevention.

CPRIT is charged by the Texas Legislature to do the following:

- Create and expedite innovation in the area of cancer research and in enhancing the potential for a medical or scientific breakthrough in the prevention of, or cures for, cancer;
- Attract, create, or expand research capabilities of public or private institutions of higher education and other public or private entities that will promote a substantial increase in cancer research and in the creation of high-quality new jobs in the State of Texas; and
- Develop and implement the Texas Cancer Plan.

2.1. Academic Research Program Priorities

The Texas Legislature has charged the CPRIT Oversight Committee with establishing program priorities on an annual basis. These priorities are intended to provide transparency with regard to how the Oversight Committee directs the orientation of the agency's funding portfolio.

To accomplish CPRIT's long-term vision, the Oversight Committee has identified these 2026 priorities:

- Investing in the cancer research capacity of Texas institutions through recruitment of cancer scholars, investment in core facilities, and investment in individual investigator awards in all regions of the state;
- Building the Texas cancer life science ecosystem across Texas by bridging discovery and translational research into early-stage company products with high impact on cancer patient care and creating economic development for the State of Texas; and
- Increasing the capacity for Texas to have a significant impact on cancer prevention and early detection, ultimately decreasing cancer incidence and mortality.

Established Principles:

- Scientific excellence and impact on cancer
- Increasing the life sciences infrastructure in all regions of the state
- Reducing cancer disparities

The program priorities for academic research adopted by the Oversight Committee include funding projects that address the following:

- Recruitment of outstanding cancer researchers to Texas
- Investment in core facilities
- A broad range of innovative, investigator-initiated research projects
- Implementation research to accelerate the adoption and deployment of evidence-based prevention, early detection, or risk assessment approaches, and interventions
- Computational oncology and analytic methods
- Childhood and adolescent cancers
- Hepatocellular cancer
- Expanding access to innovative clinical trials
- Cancer survivorship research to enhance the health and well-being of cancer survivors and caregivers.

3. RATIONALE

The aim of this award is to expand access to clinical trials in Texas by providing financial support to establish or enhance clinical trial capacity in rural and underserved communities. By providing seed funding for essential infrastructure, staffing, and operational support, this award will enable eligible sites to become trial ready and participate in industry or cooperative group-sponsored oncology clinical trials.

Cancer clinical trials are critical to developing new standard-of-care treatment options and improving patient outcomes. However, many patients who could benefit or desire to participate in a clinical trial don't have access to those trials because (1) they are from an underserved or underinsured population without access to a cancer center; (2) they do not have close geographic access to an urban cancer center where most of these trials are offered; or (3) they can't afford to travel to another destination and stay there for the duration of the clinical trial. This problem often gives rise to a selection bias for the trial in that patients who do participate are not reflective of the population living with cancer, and there is a need for better demographic representation of Texas, including rural groups, to be captured in early trials before a new drug enters the marketplace. Thus, solutions to address these issues must consider bringing the trials closer to the patients or providing support to bring the patients to the trial if it can't be done

locally. These problems are particularly important in large states like Texas where patients are often hundreds of miles from an academic urban clinical research center offering state-of-the-art clinical trials of new and promising treatments.

There are additional barriers to increasing access to clinical trials other than patient financial and geographic concerns, and these relate in part to the medical care available in a smaller community. For example, community oncologists may not have the necessary experience, resources, or time to establish a clinical trials program that includes an experienced research pharmacist, research nurse, study coordinator, and other staff that are critical for a busy physician to enter patients on a clinical trial. Ensuring that more patients with cancer can participate in trials over the course of their care will require multiple components, including expanding the pool of clinical trialists in conjunction with developing research infrastructure inclusive of the workforce of trained research staff. This RFA mechanism addresses the second of these gaps, which is enhancing clinical trial capacity in rural and underserved communities by providing essential infrastructure, staffing, and operational support. Awards are intended to establish or enhance clinical trial capacity in rural and underserved communities in Texas. Rural and underserved counties may be identified via web-based tools from the [US Department of Health and Human Services](#)

4. RESEARCH OBJECTIVES

The goal of this RFA is to provide oncologists and their patients who currently have limited access to cancer therapeutic trials with opportunities to participate in cancer trials by increasing the infrastructure and capacity to conduct clinical research in rural and underserved communities in Texas. This mechanism will support access to phase 2 and 3 cancer therapeutic trials appropriate for a community oncology care setting.

To launch this program, CPRIT plans to provide, on a competitive application basis, resources to support development and operations of a clinical trials program to eligible sites to become trial ready and participate in industry or cooperative group-sponsored oncology clinical trials. Award funds may be used for staffing, such as research coordinators and regulatory managers, equipment, eg, -70°C freezers, EMR integration, training, and partial costs for a web-based protocol management system. Funding may also support partnerships with SMOs for turnkey startup services. Sites with limited experience in clinical trials are strongly encouraged to work

with an SMO to perform site readiness assessment and develop an onboarding plan. Sites are required to identify a clinical champion (physician or APP) with a demonstrated interest in clinical research who will provide overall leadership at their site. Additionally, sites must demonstrate access to a sufficient patient population (eg, ≥ 250 new cancer patients annually), access to institutional or central IRB, and institutional support.

Metrics of success include the following:

1. The development of operational trial infrastructure by the end of Year 1.
2. The ability to evaluate trial eligibility for new patients and enter eligible patients on therapeutic trials.
3. Satisfactory performance on quality control and clinical protocol audit evaluations.
4. Satisfactory staff training and demonstration of continued learning.
5. Active trial accrual and sponsor engagement by the end of Year 2.
6. Demonstrated ability to sustain research operations independently by Year 3.
7. Increased access to trials for rural and underserved cancer patients in local communities by Year 3 as measured by accrual metrics and trajectory.

5. FUNDING INFORMATION

Applicants may request a maximum of \$300,000 in total costs per year for up to 3 years. Funds may be used for personnel salaries and fringe benefits, eg, research coordinators and regulatory managers, research supplies, equipment, eg, -70°C freezers, licensing fees for clinical trials management system, cost for central IRB review (see [section 9.2.7](#)), or to support partnerships with SMOs for turnkey startup services. Funds from this CPRIT award may not be used for salary support of the PI. Requests for funds to support construction and/or renovation will not be approved under this funding mechanism. State law limits the amount of indirect costs to no more than 5% of the total award amount.

6. ELIGIBILITY

- The applicant must be a Texas-based entity. Any public or not-for-profit institution, health care system, community hospital, critical access hospital, federally qualified health center, or safety-net provider in rural or medically underserved areas in Texas is eligible

to apply for funding under this award mechanism. TREC-eligible institutions are qualified to apply, as they typically serve rural areas of the state and underserved communities. See the *Instructions for Applicants*, which will be released on August 5, 2025, for a list of TREC-eligible institutions. A public or private company is not eligible for funding under this award mechanism.

- Sites currently without a cancer clinical trials program or with minimal activity are eligible and encouraged to apply for this award.
- Sites must demonstrate access to a sufficient patient population (eg, ≥ 250 new cancer patients annually) and institutional support.
- An entity may only submit 1 application under this RFA.
- The PI must be licensed in Texas and have an MD, DO, or equivalent medical degree, and must be a full-time resident of Texas at the time the application is submitted and during the entire time the grant is active.
- The PI must commit a minimum of 5% effort throughout the entire award period.
- MIs are not allowed under this RFA. Note that CPRIT does not allow the use of the term Co-PI.
- An individual may serve as a PI on no more than 3 active CPRIT Academic Research grants at the time of the ROTAA. Recruitment and Research Training Awards do not count toward the 3-grant maximum; however, CPRIT considers MIRA Project MIs equivalent to a PI. For the purpose of calculating the number of active grants, CPRIT will consider the number of active grants at the time of the effective date for the award contract (for this cycle expected to be June 1, 2026).
- The institution may submit both an application to this RFA and a new application to the Recruitment or Retention of Clinical Trialists Award RFA during this fiscal year.
- An applicant is eligible to receive a grant award only if the applicant certifies that the applicant institution or organization, including the PI, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's institution or organization (or any person related to 1 or more of these individuals within the second degree of consanguinity or affinity) has not made and will not make a contribution to CPRIT or to any foundation specifically created to benefit CPRIT.
- An applicant is not eligible to receive a CPRIT grant award if the applicant PI, any senior member or key personnel listed on the grant application, or any officer or director of the

grant applicant's organization or institution is related to a CPRIT Oversight Committee member.

- The applicant must report whether the applicant institution or organization, the PI, or other individuals who contribute to the execution of the proposed project in a substantive, measurable way, regardless of whether these individuals are slated to receive salary or compensation under the grant award, are currently ineligible to receive federal grant funds or have had a grant terminated for cause within 5 years prior to the submission date of the grant application.
- CPRIT grants will be awarded by contract to successful applicants. Certain contractual requirements are mandated by Texas law or by administrative rules. Although applicants need not demonstrate the ability to comply with these contractual requirements at the time the application is submitted, applicants should make themselves aware of these standards before submitting a grant application. Significant issues addressed by the CPRIT contract are listed in [section 12](#) and [section 13](#). All statutory provisions and relevant administrative rules can be found at www.cprit.texas.gov.

7. RESUBMISSION POLICY

Resubmissions are not applicable for this RFA.

8. RENEWAL POLICY

Renewal applications are not applicable for this RFA.

9. RESPONDING TO THIS RFA

9.1. Application Submission Guidelines

Applications must be submitted via the CPRIT Application Receipt System (CARS) (<https://CPRITGrants.org>). **Only applications submitted through this portal will be considered eligible for evaluation.** The applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application was submitted. The PI must create a user account in the system to start and apply. Furthermore, the Application Signing Official (a person authorized to sign and submit the application for the organization) and the Grants Contract/Office of Sponsored Projects Official (the individual who will manage the grant

contract if an award is made) also must create a user account in CARS. Applications will be accepted beginning at 7 AM central time on September 9, 2025, and must be submitted by 4 PM central time on December 2, 2025. **Submission of an application is considered an acceptance of the terms and conditions of the RFA.**

9.1.1. Submission Deadline Extension

The submission deadline may be extended upon a showing of extenuating circumstances. A request for a deadline extension based on the need to complete multiple CPRIT or other grants applications will be denied. All requests for extension of the submission deadline must be submitted via email to the CPRIT [Helpdesk](#) within 24 hours of the submission deadline.

Submission deadline extensions, including the reason for the extension, will be documented as part of the grant review process records. Please note that deadline extension requests are very rarely approved.

9.2. Application Components

Applicants are advised to follow all instructions to ensure accurate and complete submission of all components of the application. Please refer to the *Instructions for Applicants* document for details that will be available August 5, 2025, when the RFA is posted. Submissions that are missing 1 or more components or do not meet the eligibility requirements listed in [section 6](#) will be administratively withdrawn without review.

9.2.1. Abstract and Significance (5,000 characters)

Describe the proposed clinical trials program to be developed or enhanced, including the current and planned clinical trials capacity and infrastructure. Briefly describe the staffing model and workflow design for research operations. Provide the phases of development and milestones, including trial activation, accrual, and transition and sustainability planning. Describe the patient population and institutional support. Clearly address how the proposed clinical trials program, if successful, will have a major impact on the rural and underserved patient population served by the institution.

9.2.2. Layperson's Summary (2,000 characters)

Provide a layperson's summary of the proposed clinical trials program including description of the patient populations served. Describe, in simple, nontechnical terms, how enhancing the

clinical research infrastructure will facilitate access to clinical trials, the type(s) of trials proposed for the program, and the expected impact on patient access to clinical trials. The information provided in this summary will be made publicly available by CPRIT, particularly if the application is recommended for funding. **Do not include any proprietary information in the layperson's summary.** The layperson's summary will also be used by advocate reviewers ([section 10.1](#)) in evaluating the significance and impact of the proposed work.

9.2.3. Specific Aims and Sub aims

Please provide a description of the aims and subaims and milestones to be achieved for each year of the project. At least 1 specific aim and 1 subaim are required. Provide 2 to 3 sentences describing activities to be performed and anticipated milestones. These aims will also be used during the submission and evaluation of progress reports and assessment of project success. Up to 5 specific aims and 5 subaims per specific aim may be entered. At least 1 sub aim is required per aim.

9.2.4. Timeline (1 page)

Provide an outline of anticipated major milestones to be tracked in the implementation and evaluation of the clinical trials program. Timelines will be reviewed for reasonableness, and adherence to timelines will be a criterion for continued support of successful applications. If the application is approved for funding, this section will be included in the award contract. Applicants are advised not to include information that they consider confidential or proprietary when preparing this section.

9.2.5. Clinical Trials Program Description (5 pages)

- Discuss the qualifications and the role of the PI. How will the PI promote the identification and conduct of trials at the institution?
- Describe the applicant institution, community oncology practice, or cancer care system.
- Discuss the patient population and geographic region served and document the cancer patient volume and principal cancers treated.
- Describe the current clinical research organizational capabilities and staffing. Describe additional needs and proposed staffing model and workflow design for research operations.

- Describe the current clinical research portfolio, eg, number and type of ongoing clinical trials, eg, interventional (therapeutic vs nontherapeutic), observational, behavioral, clinical trial phase (phase 1, 2, 3), and trial sponsors.
- Describe the goals for expanding the clinical research program. Provide the milestones and expected outcomes including expected trial activation and accrual.
- Document access to an institutional or a central IRB.
- For sites contracting with an SMO, describe the role of, and services to be performed by, the contracting SMO.
- Describe existing affiliations with academic medical centers, cancer centers, or cooperative oncology groups providing mentorship, collaboration, and access to clinical trials. Identify how this relationship will be enhanced and leveraged to increase access to appropriate phase 2 and 3 clinical trials once capacity has been increased.
- Provide a description of institutional support, and submit a sustainability plan to demonstrate the post-award viability of the program.
- Describe performance metrics and how they will be monitored.

9.2.6. Publications/References

Provide a concise and relevant list of publications/references cited for the application.

9.2.7. Budget and Justification

Provide a detailed justification of the budget for the entire proposed period of support, including salaries and fringe benefits, supplies, and equipment. Award funds may be used for staffing, such as research coordinators and regulatory managers, equipment (eg, -70°C freezers), EMR integration, training, and partial costs for a web-based clinical trials management system. Funding may also support partnerships with SMOs for turnkey startup services or for travel for the purposes of training, eg, to collaborating institutions. Requests for funds to support construction and/or renovation will not be approved under this funding mechanism. Applicants are advised not to interpret the maximum allowable request under this award as a suggestion that they should expand their anticipated budget to this level.

In preparing the requested budget, applicants should be aware of the following:

- Equipment having a useful life of more than 1 year and an acquisition cost of \$10,000 or more per unit must be specifically approved by CPRIT. An applicant does not need to

seek this approval prior to submitting the application. Per TxGMS, as of September 1, 2024, for all CPRIT grantees, the minimum threshold for equipment purchases is \$10,000. Any purchases up to \$9,999 should now be categorized as supplies.

- The maximum annual salary (also referred to as direct salary or institutional base salary) that an individual may request under a CPRIT award for FY 2026 is \$225,000; CPRIT FY 2026 is from September 1, 2025, through August 31, 2026. Salary does not include fringe benefits and/or facilities and administrative costs, also referred to as indirect costs. An individual's institutional base salary is the annual compensation that the applicant organization pays for an individual's appointment, whether that individual's time is spent on research, teaching, patient care, or other activities. Base salary excludes any income that an individual may be permitted to earn outside of his or her duties to the applicant organization.
- Texas law limits the amount of grant funds that may be spent on indirect costs to no more than 5% of the total award amount (5.263% of the direct costs). Guidance regarding indirect cost recovery can be found in CPRIT's Administrative Rules, which are available at www.cprit.texas.gov.

9.2.8. Institutional Commitment

The funds provided by CPRIT for the Rural Oncology Trials Accelerator Award must be complemented by a strong financial institutional commitment to the development or enhancement of a clinical trials program. The sponsoring institution must provide a letter of commitment documenting the resources that will be provided, including the amount and sources of salary support and all additional financial support that will be available to the clinical research program through the course of the CPRIT award. This commitment may include salary support for clinical research personnel, salary support for protected time for the PI to oversee the research program, or equipment, as well as other clinical research expenses. The financial commitments made by the sponsoring institution are required by Texas law to be equal to or exceed 50% of the proposed CPRIT award for the duration of the award.

9.2.9. Biographical Sketches (5 pages each)

Applicants should provide a biographical sketch that describes their education and training, professional experience, awards and honors, and publications relevant to cancer research. A

biographical sketch must be provided for the PI, as required by the online application receipt system. Up to **5 additional** biographical sketches for key personnel may be provided; these should be concatenated into a single PDF with a 25-page limit. **Each biographical sketch must not exceed 5 pages.** The NIH biosketch format is appropriate.

9.2.10. Current and Pending Support

Describe the funding source and duration of all current and pending support for all personnel who have included a biographical sketch with the application. For each award, provide the title, a 2-line summary of the goal of the project, and, if relevant, a statement of overlap with the current application. At a minimum, current and pending support for the PI must be provided. Refer to the sample current and pending support document located in [Current Funding Opportunities](#) for Academic Research in CARS.

9.2.11. Institutional/Collaborator Support and/or Other Certification (4 pages)

Applicants may provide letters of institutional support and/or other certification documentation relevant to the proposed project. A maximum of 4 pages may be provided.

Applications that are missing 1 or more of these components; exceed the specified page, word, or budget limits; or that do not meet the eligibility requirements listed above will be administratively rejected without review.

9.3. Formatting Instructions

Formatting guidelines for all submitted CPRIT applications are as follows:

- **Language:** English
- **Document Format:** PDF only
- **Font Type/Size:** Arial (11 point), Calibri (11 point), or Times New Roman (12 point)
- **Line Spacing:** Single
- **Page Size:** 8.5 x 11 inches
- **Margins:** 0.75 inch, all directions
- **Color and High-Resolution Images:** Images, graphs, figures, and other illustrations must be submitted as part of the appropriate submitted document. Applicants should include text to explain illustrations that may be difficult to interpret when printed in black and white.

- **Scanning Resolution:** Images and figures must be of lowest reasonable resolution that permits clarity and readability. Unnecessarily large files will NOT be accepted, especially those that include only text.
- **References:** Applicants should use a citation style that includes the full name of the article and that lists at least the first 3 authors. Official journal abbreviations may be used. An example is included below; however, other citation styles meeting these parameters are also acceptable if the journal information is stated. Include URLs of publications referenced in the application.
Smith, P.T., Doe, J., White, J.M., et al (2006). Elaborating on a novel mechanism for cancer progression. *Journal of Cancer Research*, 135: 45–67.
- **Internet URLs:** Applicants are encouraged to provide the URLs of publications referenced in the application; however, applicants should not include URLs directing reviewers to websites containing additional information about the proposed research.
- **Headers and Footers:** These should not be used unless they are part of a provided template.
- **Page Numbering:** **DO NOT** add page numbers in any of the submitted documents. These will be added automatically by the system when the application is concatenated.
- All attachments that require signatures must be filled out, printed, signed, scanned, and then uploaded in PDF format.

10. APPLICATION REVIEW

10.1. Review Process Overview

All eligible applications will be evaluated using a 2-stage peer review process: (1) Peer review and (2) prioritization of grant applications by the CPRIT Scientific Review Council (SRC). In the first stage, applications will be evaluated by an independent peer review panel consisting of scientific experts, as well as advocate reviewers, using the criteria listed below. In the second stage, applications judged to be most meritorious by the peer review panels will be evaluated and recommended for funding by the CPRIT SRC based on comparisons with applications from all of the peer review panels and programmatic priorities. Applications approved by the SRC will be forwarded to the CPRIT Program Integration Committee (PIC) for review. The PIC will consider factors including program priorities set by the Oversight Committee, portfolio balance across

programs, and available funding. The CPRIT Oversight Committee will vote to approve each grant award recommendation made by the PIC. The grant award recommendations will be presented at an open meeting of the Oversight Committee and must be approved by two-thirds of the Oversight Committee members present and eligible to vote. The review process is described more fully in CPRIT's Administrative Rules, [chapter 703, sections 703.6 to 703.8](#).

10.2. Confidentiality of Review

Each stage of application review is conducted confidentially, and all CPRIT Scientific Peer Review Panel members, SRC members, PIC members, CPRIT employees, and Oversight Committee members with access to grant application information are required to sign nondisclosure statements regarding the contents of the applications. All technological and scientific information included in the application is protected from public disclosure pursuant to Health and Safety Code §102.262(b).

Individuals directly involved with the review process operate under strict conflict-of-interest prohibitions. All CPRIT Scientific Peer Review Panel members and SRC members are non-Texas residents.

An applicant will be notified regarding the peer review panel assigned to review the grant application. Peer review panel members are listed by panel on CPRIT's website.

By submitting a grant application, the applicant agrees and understands that the only basis for reconsideration of a grant application is limited to an undisclosed conflict of interest as set forth in CPRIT's Administrative Rules, [Texas Administrative Code, Title 25, chapters 701 to 703](#)

Communication regarding the substance of a pending application is prohibited between the grant applicant (or someone on the grant applicant's behalf) and the following individuals: an Oversight Committee member, a PIC member, a Scientific Review Panel member, or an SRC member. Applicants should note that the CPRIT PIC comprises the CPRIT Chief Executive Officer, the Chief Scientific Officer, the Chief Prevention Officer, the Chief Product Development Officer, and the Commissioner of State Health Services. The prohibition on communication begins on the first day that grant applications for the particular grant mechanism are accepted by CPRIT and extends until the grant applicant receives notice regarding a final decision on the grant application. The prohibition on communication does not apply to the time

period prior to the opening of CARS. Intentional, serious, or frequent violations of this rule may result in the disqualification of the grant application from further consideration for a grant award.

10.3. Review Criteria

Peer review of applications will be based on primary scored criteria and secondary unscored criteria, listed below. Review committees will evaluate and score each primary criterion and subsequently assign a global score that reflects an overall assessment of the application. **The overall assessment will not be an average of the scores of individual criteria; rather, it will reflect the reviewers' overall impression and enthusiasm of the application. Evaluation of the scientific merit of each application is within the sole discretion of the peer reviewers.**

10.3.1. Primary Criteria

Primary criteria will evaluate the scientific merit and potential impact of the proposed work contained in the application. Concerns with any of these criteria potentially indicate a major flaw in the significance and/or design of the proposed study. Primary criteria include the following:

Significance and Impact: Will the proposed program expand patient access and geographic proximity to innovative clinical trials? Is the program aligned with CPRIT's strategic goals to reduce cancer disparities?

Research Plan: Does the plan for the proposed program document a feasible and efficient implementation plan to strengthen access to clinical trials and does the plan incorporate best practices to ensure timely clinical treatment decisions and the output of high-quality data? Will the institution have operational infrastructure by the end of Year 1 and active trial accrual and sponsor engagement by the end of Year 2? Is there a robust staffing model and workflow design for research operations? Is there evidence of strong institutional commitment and leadership engagement? Is there a suitable sustainability plan to demonstrate viability beyond the tenure of this award.

Applicant Investigator: Does the applicant investigator demonstrate the required expertise and experience to lead the program?

Relevance: Is there evidence of an adequate patient population and access, and is the program likely to show increased access to trials for rural and underserved cancer patients?

10.3.2. Secondary Criteria

Secondary criteria contribute to the global score assigned to the application. Concerns with these criteria potentially question the feasibility of the proposed research. Secondary criteria include the following:

Research Environment: Upon execution of the goals of the ROTAA, will the research team and institution have the needed expertise, facilities, and resources to conduct phase 2 and phase 3 therapeutic trials successfully? Are the levels of effort of the key personnel appropriate? Are there opportunities for mentorship and collaboration with an established research institution, eg, an academic cancer center to facilitate mentorship and access to clinical trials?

Budget: Is the budget appropriate for the proposed work?

Duration: Is the stated duration appropriate for the proposed work?

11. KEY DATES

RFA

RFA release	August 5, 2025
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Application

Online application opens	September 9, 2025, 7 AM central time
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Application due	December 2, 2025, 4 PM central time
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Application review	March 2026
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Award

Award notification	May 2026
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Anticipated start date	June 1, 2026
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12. AWARD ADMINISTRATION

Texas law requires that CPRIT grant awards be made by contract between the applicant and CPRIT. CPRIT grant awards are made to institutions or organizations, not to individuals. Awards made under this RFA are not transferable to another institution. Award contract negotiation and execution will commence once the CPRIT Oversight Committee has approved an application for

a grant award. CPRIT may require, as a condition of receiving a grant award, that the grant recipient use CPRIT's electronic Grant Management System to exchange, execute, and verify legally binding grant contract documents and grant award reports. Such use shall be in accordance with CPRIT's electronic signature policy as set forth in [chapter 701, section 701.25](#).

Texas law specifies several components that must be addressed by the award contract, including needed compliance and assurance documentation, budgetary review, progress and fiscal monitoring, and terms relating to revenue sharing and intellectual property rights. These contract provisions are specified in CPRIT's Administrative Rules, which are available at www.cprit.texas.gov.

Applicants are advised to review CPRIT's Administrative Rules related to contractual requirements associated with CPRIT grant awards and limitations related to the use of CPRIT grant awards as set forth in [chapter 703, sections 703.10, 703.12](#).

Prior to disbursement of grant award funds, the grant recipient organization must demonstrate that it has adopted and enforces a tobacco-free workplace policy consistent with the requirements set forth in CPRIT's Administrative Rules, [chapter 703, section 703.20](#).

CPRIT requires award recipients to submit an annual progress report. These reports summarize the progress made toward the research specific aims and address plans for the upcoming year. **Continuation of funding is contingent upon the timely receipt of these reports.** Failure to provide timely and complete reports may waive reimbursement of grant award costs and may result in the termination of the award contract. Forms and instructions will be made available at www.cprit.texas.gov.

In addition, fiscal reporting, human studies reporting, and vertebrate animal use reporting will be required as appropriate. CPRIT requires funding acknowledgement to include the award grant ID on all print and visual materials that are funded in whole or in part by CPRIT grants. Examples of print and visual materials include, but are not limited to, publications, brochures, pamphlets, project websites, videos, and media materials. Grantees must have written approval from CPRIT prior to the purchase of any equipment. If the equipment is clearly defined in the grantee's budget submitted with the initiating award requirements, then approval of the grant award constitutes "prior approval" for the purchase.

13. REQUIREMENT TO DEMONSTRATE AVAILABLE FUNDS

Texas law requires that prior to the disbursement of CPRIT grant funds, the award recipient must demonstrate that it has an amount of funds equal to one-half of the CPRIT funding dedicated to the research that is the subject of the award. The demonstration of available matching funds must be made at the time the award contract is executed and annually thereafter, not when the application is submitted. Grant applicants are advised to consult CPRIT's Administrative Rules, [chapter 703, section 703.11](#), for specific requirements regarding the demonstration of available funding.

14. CONTACT INFORMATION

14.1. Helpdesk

The Helpdesk will answer queries submitted via email within 1 business day. Helpdesk support is available for questions regarding user registration and online submission of applications as well as page limitations, formatting, and how to upload application components/subsections in the appropriate tabs of CARS. Helpdesk staff cannot answer scientific or programmatic questions. Before contacting the Helpdesk, please refer to the *Instructions for Applicants* document, which provides a step-by-step guide on using CARS.

Hours of operation: Monday through Friday, 8 AM to 6 PM central time

Tel: 866-941-7146

Email: Help@CPRITGrants.org

14.2. Scientific and Programmatic Questions

Scientific and programmatic questions should be directed to the CPRIT Director of Academic Research. Before contacting CPRIT, please refer to the *Instructions for Applicants* document and contact the Helpdesk for any items related to CARS, page limitations, formatting, etc.

Email: Research@cprit.texas.gov

Website: www.cprit.texas.gov