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We contribute to the best interests
of patients, the medical and research
profession, our employees and
communities.

Genentech
A Member of the Roche Group

How to apply for Scientific Project Support
Tip Sheet

i Scientific Project Support

Scientific Project Support provides funding for general research, translational research, other research or development projects, and / or other initiatives of research organizations, labs, and academic institutions. Other scientific project that fall into this category are Third Party Awards made through major association (i.e. Career Development Awards, Young Investigator Awards, Advanced Clinical Research Awards, etc.)

Research collaborations, clinical trials and associated correlative research involving or undertaken in relation to Genentech or Roche products (whether investigational and / or approved for other uses) are excluded from this type of support

✓ Checklist

You need to submit the funding request at least 60 days prior to the start of the activity. Requests submitted with less lead time will be time will be not accepted by the system or denied. Prior to submitting the funding request, make sure that you have prepared the following information:

☐ Tax ID #

☐ Tax status

☐ W-9 form

New applicants: Visit the IRS website for a blank W-9 if you don't have a current, signed W-9.
Returning applicants: The W-9 must be signed and on the most current IRS W-9 form.

☐ IRS 501(c)(3) determination letter

If your organization is exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, please upload your IRS determination letter.

☐ 990 form

Please upload your current 990 form filed with the IRS.

☐ Organization's annual budget

☐ Address and/or Bank Account Information (for ACH/Wire payments)
This is the location or bank account to which an approved payment will be sent

☐ Number of employees in the organization

☐ Itemized budget for the project for which funding is requested

☐ Scientific Project description

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I Login

› **Go to funding.gene.com**

1. Click the "Apply for Funding / Login" link

Our Giving Philosophy

We see scientists, researchers, and medical professionals working together to solve the world's most pressing problems. We see patients coming together to form communities. We see organizations providing education, raising awareness and providing much-needed support. That's why we offer support, resources, and funding.

Apply for Funding / Login ①

› **Enter your Account information**

2. User name
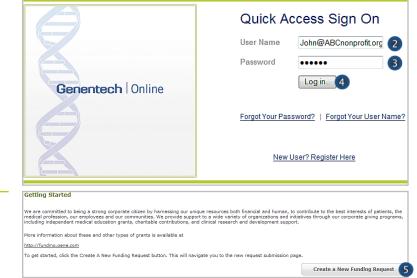   *This is the email address used when you registered as a user*

3. Password
   This is the password you created when you registered as a user

4. Click "Log in…"

Quick Access Sign On

User Name John@ABCnonprofit.org ②
Password ●●●●●● ③
Log in… ④

Forgot Your Password? | Forgot Your User Name?

New User? Register Here

5. Click on the "Create a New Funding Request" link

Getting Started

We are committed to being a strong corporate citizen by harnessing our unique resources both financial and human, to contribute to the best interests of patients, the medical profession, our employees and our communities. We provide support to a wide variety of organizations and initiatives through our corporate giving programs, including independent medical education grants, charitable contributions, and clinical research and development support.

More information about these and other types of grants is available at

http://funding.gene.com

To get started, click the Create A New Funding Request button. This will navigate you to the new request submission page.

Create a New Funding Request ⑤

II Organization Registration

› **Complete the Tax information**

The following information will be pre-populated if you have previously used the Genentech Funding Request System

1. Select where the organization is located

2. If the organization is located in the United States, enter Tax ID
   Format: 12-1234567. Must match Tax-ID on W-9

2a. If the organization is not located in the United States, enter the unique non-US Tax-ID

2b. If the organization is not located in the United States, confirm if you have W-8BEN status

3. Provide the organization's tax status
   If the organization is located in the United States, tax status must match tax status on W-9

4. Click "Continue"

Tax ID

* Where is this organization located? United States ①
* Tax ID 98-7654321 ②
* Tax status 501 (c)(3) ③
Continue ④

▸ Organization Detail
▸ IRS Documentation
▸ Select a Location

>>> Or >>>

Tax ID

* Where is this organization located? Canada ①
* Non-US based organization ID (Please specify the organization's unique ID within the country) ②ᵃ
* Do you have W-8BEN status? --None-- ②ᵇ
* Tax status --None-- ③
Continue ④

II Organization Registration (continued)

› **Complete the Organization Detail section**

You will not be able to make any Organization Detail information changes if your Organization has been previously registered. Please contact our customer support at 877.313.5778 to make updates.

1. Enter the Organization name

2. Select the Organization type
Please select carefully. Once saved, only a system administrator can edit your selection.
Select "Other" only if no listed option applies.
For organization type "Charitable Foundation", answer the following additional questions:

2a. Is it a Charitable Foundation of a group practice? If yes, please answer question 2b

2b. How many physicians are in the group practice that sponsors this foundation?

3. Enter the organization's annual budget
Annual budget includes all programs and events, in addition to the operating budget

4. Enter the Organization's website address

5. Enter the Organization's mission

6. Enter the Number of employees

7. Confirm if organization purchases Genentech / Roche products

8. Confirm if organization prescribes Genentech / Roche products

9. Confirm if organization develops Medicare recognized compendia or nationally recognized treatment guidelines

10. Is your organization a Sole Proprietorship?
This question is applicable if your organization is For-Profit and US based

11. Confirm if organization is owned wholly or in part by a physician or a group of physicians
The answer defaults to "No" if the tax status is 501 (c)(3) or 501 (c)(6), or if Governmental Organization

12. Enter the Parent organization name and Parent organization tax ID, if applicable (optional)

13. Click "Save and Continue"

>>> If Organization Type is "Charitable Foundation" >>>

How to apply for Scientific Project Support
Tip Sheet

II Organization Registration (continued)

› **Upload the W-9 (or W-8BEN) form**

> *W-9 or W-8BEN form must be signed and on the most current IRS form*

1. Click on "Choose File" to select and upload the W-9 or W-8BEN form

   To replace the uploaded copy, click on "Choose File" and select the new copy

› **Upload the IRS 501(c)(3) determination letter**

2. Click on "Choose File" to select and upload the IRS 501(c)(3) determination letter

› **Upload the current 990 form**

3. Click on "Choose File" to select and upload the 990 form

   To replace the uploaded copy, click on "Choose File" and select the new copy

---

▸ Tax ID

▸ Organization Detail

▾ **IRS Documentation**

* Please upload your current, completed and signed W-9 / W-8BEN-E form.

[Choose File] No file chosen **1**

Please attach a copy of the organization's IRS 501(c)(3) determination letter.

[Choose File] No file chosen **2**

Please upload your current 990 form.

[Choose File] No file chosen **3**

[Back] [Save and Continue]

▸ Select a Location

How to apply for Scientific Project Support
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III Funding Type Selection

› **Complete the Funding Type selection**

   1. Indicate what you are seeking funding for

      Option 2 will apply for most scientific project support requests: "A scientific program"

   2. Validate your selection

      Your selection can not be changed once you proceed from this point

   3. Click "Continue"

Funding Type Selection

What are you seeking funding for?

- ○ An educational event/meeting, conference, activity, or program
- ◉ A scientific project   **1**
- ○ A fellowship
- ○ A fundraiser, health screening, K-12 education program, community event, or other charitable cause
- ○ An exhibit booth or tabletop at a scientific/medical meeting or convention
- ○ Any other opportunity that provides promotional or marketing benefits

Scientific Project Support – These support requests provide funding for general research, translational research, other research or development projects, and/or other initiatives of research organizations, labs, and academic institutions. Research collaborations, clinical trials and associated correlative research involving or undertaken in relation to Genentech or Roche products (whether investigational and/or approved for other uses) are excluded from this type of support.   **2**

Please confirm your selection prior to clicking continue. This selection cannot be changed once you proceed from this point.

[Back]   [Continue] **3**

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› **Complete the Application information**

A unique "Request ID" has been assigned to the funding request

1. Enter the Requested amount

2. Select the Therapeutic area

3. Select the Disease state

   If you can not find the applicable disease state in the drop-down list, please select "other"

4. If you selected "other", please specify which Disease State applies to this request
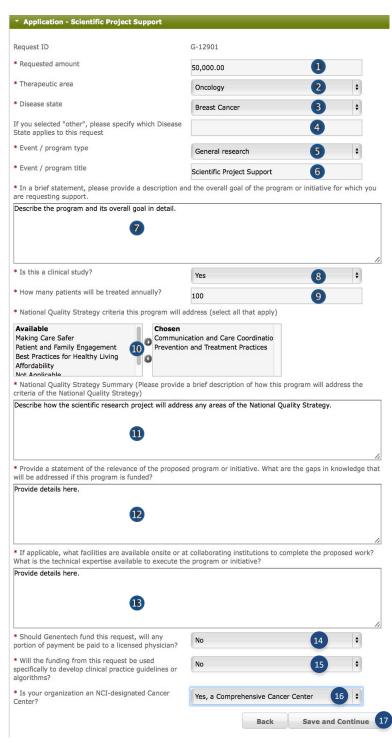
5. Select the Event / program type

6. Enter the Event / program title

7. Enter the Purpose of the support / program description

   Provide a short description of the program including format, scope, and number of programs covered. You will be provided an opportunity to upload additional documentation later, if needed

8. Select whether the project is a clinical study*

9. *If the answer is Yes, enter the number of patients that will be treated annually by this study

10. Select the National Quality Strategy elements the project is designed to address

    Note: The National Quality Strategy(NQS) website is www.ahrq.gov/workingforquality

11. Provide a detailed explanation for any selected elements

12. Enter the Needs assessment summary

    Provide a brief description of the need that the program addresses. What are the identified clinical gaps that justify the need for education?

13. Enter the Program objectives

    Describe the key learnings that attendees will take away from this program

14. Indicate if any portion of funding from Genentech will be paid to a licensed physician

15. Indicate if the funding from this request will be used specifically to develop clinical practice guidelines or algorithms

    Example of clinical practice guidelines: Statements that include recommendations intended to help practitioners to make appropriate healthcare decisions for specific clinical conditions

16. Indicate if your organization is an NCI-designated Cancer Center

17. Click "Save and Continue"

Application - Scientific Project Support

Request ID	G-12901
* Requested amount	50,000.00 |①
* Therapeutic area	Oncology |②
* Disease state	Breast Cancer |③
If you selected "other", please specify which Disease State applies to this request	|④
* Event / program type	General research |⑤
* Event / program title	Scientific Project Support |⑥

* In a brief statement, please provide a description and the overall goal of the program or initiative for which you are requesting support.

Describe the program and its overall goal in detail. ⑦

* Is this a clinical study?	Yes |⑧
* How many patients will be treated annually?	100 |⑨

* National Quality Strategy criteria this program will address (select all that apply)

Available
Making Care Safer
Patient and Family Engagement
Best Practices for Healthy Living
Affordability
Not Applicable

⑩

Chosen
Communication and Care Coordinatio
Prevention and Treatment Practices

* National Quality Strategy Summary (Please provide a brief description of how this program will address the criteria of the National Quality Strategy)

Describe how the scientific research project will address any areas of the National Quality Strategy. ⑪

* Provide a statement of the relevance of the proposed program or initiative. What are the gaps in knowledge that will be addressed if this program is funded?

Provide details here. ⑫

* If applicable, what facilities are available onsite or at collaborating institutions to complete the proposed work? What is the technical expertise available to execute the program or initiative?

Provide details here. ⑬

* Should Genentech fund this request, will any portion of payment be paid to a licensed physician?	No	⑭
* Will the funding from this request be used specifically to develop clinical practice guidelines or algorithms?	No	⑮
* Is your organization an NCI-designated Cancer Center?	Yes, a Comprehensive Cancer Center	⑯

Back | Save and Continue ⑰

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IV	Application (continued)

▾ Demographic Data

› **Complete the Demographic Data**

Please note this data will not impact the grant decision making processes.

When considering the populations primarily served by the overall grant, indicate the demographic categories that apply, specifically:

1. Indicate the Age groups primarily served by the grant

> *Select relevant groups from the "Available" list and click the right arrow to move the selection into the "Chosen" list*

> *If there are no demographic groups specifically targeted through the grant, select "General Public," where applicable.*

> *You may also select "Choose not to specify" if desired.*

2. Indicate the Gender Identity and Sexual Orientation of groups primarily served by the overall grant

3. Indicate the Race and Ethnicity of groups primarily served by the overall

4. Indicate the Social and Economic Status of groups primarily served by the overall grant

5. Indicate the Health and Insurance Status of groups primarily served by the overall grant

6. Indicate the Work Status of groups primarily served by the overall grant

7. Indicate if the funding from this request will primarily support ESL / Non-English speaking populations

8. Click "Save and Continue"

Please complete the following fields about the primary population(s) served by the overall grant, where applicable. This data aims to help us understand and track how our giving reflects the communities we serve, in the aggregate. Please note that this data will not impact grant decisionmaking processes.

* Age

Available		Chosen
Children and Youth (0-17) Young Adults (18-39) Adults (40-60) Seniors (60+) General Public (Age) Choose not to specify (Age)	▶ ◀	①

* Gender Identity and Sexual Orientation

Available		Chosen
Males Females LGBTQ General Public (Gender Identity and Sexual Orientation) Choose not to specify (Gender Identity and Sexual Orienta	▶ ◀	②

* Race and Ethnicity

Available		Chosen
American Indian or Alaskan Natives Asian Black or African American Hispanic, Latino, or Spanish Origin Hawaiian or Other Pacific Islander Middle Eastern or North African Multiracial White General Public (Race and Ethnicity) Choose not to specify (Race and Ethnicity)	▶ ◀	③

* Social and Economic Status

Available		Chosen
Economically disadvantaged people At-risk youth Immigrants and migrants Incarcerated people General Public (Social and Economic Status) Choose not to specify (Social and Economic Status)	▶ ◀	④

* Health and Insurance Status

Available		Chosen
People with disabilities Uninsured Underinsured General Public (Health and Insurance Status) Choose not to specify (Health and Insurance Status)	▶ ◀	⑤

* Work Status

Available		Chosen
Unemployed people Veterans General Public (Work Status) Choose not to specify (Work Status)	▶ ◀	⑥

* Does the grant primarily support ESL / Non-English speaking populations?

Choose not to specify (ESL) ⑦ ▲▼

Back   Save and Continue ⑧

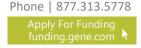# How to apply for Scientific Project Support
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› **Complete the Program details**

The request needs to be submitted at least 60 days prior to the start of the event / program

1. Enter the Start date

2. Enter the End date
   Last date of the program

3. Enter the Venue name

4. Enter the Venue city

5. Select the Venue state

6. Enter the Venue province / regions / territory

7. Enter the Venue zip code

8. Select the Venue country

9. Click "Save and Continue"

Program Details

Please note: funding requests must be started at least 60 days prior to the start of the activity.

* Start date	10/30/2014	①
	[10/30/2013]	
* End date	10/30/2015	②
	[10/30/2013]	
Venue name	ABC Hotel	③
* Venue city	City	④
Venue state	AS	⑤
Venue province/region/territory		⑥
* Venue zip code	12345	⑦
* Venue country	United States	⑧

Back   Save and Continue ⑨

VI   Budget

› **Complete the Budget for the project**

1. Enter the Total Overall Budget

   The Total Overall Budget includes all expenses for the event / activity, including expenses that will not be covered by the requested amount

2. Entered so far

   This amount is automatically calculated as you enter the budget items in the table below

3. Select the Category

   See Appendix A for a complete list of categories

4. Select the Subcategory

   See Appendix A for a complete list of subcategories

5. Enter the Amount by item

6. Enter the Quantity

7. Enter an Explanation / Description of the budget line item

8. Click "Add Line Item" for the next budget item

9. Track the Budget Total

   The Budget Total is calculated automatically
   The Budget Total has to be equal to the Total Overall Budget entered above

10. Click "Save and Continue"

   If you have any empty lines, you will need to delete them in order to proceed

---

How to Enter Budget Items
Click in the first category cell. A drop-down menu will appear. Select from the options.
Enter all values in each line item in order to proceed to the next line item.
In the Explanation field, be sure to enter a short, concise description of the expense.

Adding New Line Items to the Budget
After starting the detailed budget, click "add line item" below to add more budget categories.
The budget details you enter are tallied in the section "entered so far."

For Fundraiser Requests
Please include only the expense related costs for the fundraiser.
For example, proceeds from the fundraiser are not expense related costs.

Requested Amount	$50,000.00	
* Total Overall Budget (Please include all expenses for the event/activity, including expenses that will not be covered by the requested amount.)	$100,000.00	**1**
Entered so far	$50,000.00	**2**

▾ Budget   **3**   **4**   **5**   **6**   **7**

Actions	Category	Subcategory	Amount	Quantity	Explanation
Delete	Infrastructure	Administrative Overh...	$21,600.00	1	Fees & Tuition
Delete	Infrastructure	Lab Expense	$15,000.00	1	Lap Reasearch Costs
Delete	Infrastructure	Equipment Purchas...	$13,400.00	1	Lap Equipment

Budget Total $50,000.00   **9**

Add Line Item   **8**

Please click HERE for a budget tip sheet

Back   Save and Continue   **10**

TIPs: Entering the Budget

1. All budget line items should be entered using the available category and subcategory available in the online system.

2. Budget items should be broken down using the per unit value in each amount column and the number of units in the units column.

3. To navigate effectively, use of the TAB key is helpful.

4. The use of the Microsoft Internet Explorer browser is not recommend, but will still function.

5. Do not enter any $-sign's or decimal values.

6. Refrain from using the Misc. Other line item category, though if necessary, make sure detailed information is entered into the comments section.

7. Refrain from using the Infrastructure line item category, though if necessary, make sure detailed information is entered into the comments section.

8. Confirm that all line items (i.e. meals, honoraria, lodging, and airfare, etc.) are properly broken down before submission.

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1. Upload File Attachments

   The first document is mandatory. Attach any additional documents to describe the program. Limit 25 MB total

   If you would like to submit more than 5 documents, send them via email to fundingquestions@gene.com. Make sure to reference the Funding Request ID

   If you would like to replace one of the uploaded documents, click "Choose File" to select and upload a new document
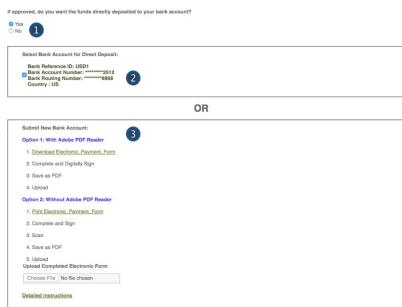
2. Click "Save and Continue"

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VIII Payment Method

› **Complete the Payment Method**

Please note that electronic payments are more secure and faster than a check payment.

If the grant is approved and funds should be directly deposited to the organization's bank account
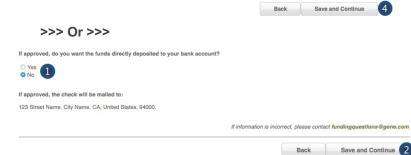
1. Select "Yes" for funds to be directly deposited to the organization's bank account

2. If your organization previously set-up its bank account, the bank account will be pre-selected

3. Or if a new bank account needs to be set-up, follow one of the options to complete the Electronic Payment Form and upload the completed form

4. Click "Save and Continue"

If approved, do you want the funds directly deposited to your bank account?

○ Yes ①
○ No

Select Bank Account for Direct Deposit:

Bank Reference ID: USD1
Bank Account Number: *********2512 ②
Bank Routing Number: *********8958
Country : US

OR

Submit New Bank Account: ③

Option 1: With Adobe PDF Reader
1. Download Electronic_Payment_Form
2. Complete and Digitally Sign
3. Save as PDF
4. Upload

Option 2: Without Adobe PDF Reader
1. Print Electronic_Payment_Form
2. Complete and Sign
3. Scan
4. Save as PDF
5. Upload

Upload Completed Electronic Form
Choose File | No file chosen

Detailed instructions

If information is incorrect, please contact fundingquestions@gene.com

Back | Save and Continue ④

>>> Or >>>

If the grant is approved and funds should be mailed to the organization's address

1. Select "No" for funds to be mailed by check to the organization's address

2. Click "Save and Continue"

>>> Or >>>

If approved, do you want the funds directly deposited to your bank account?

○ Yes
● No ①

If approved, the check will be mailed to:

123 Street Name, City Name, CA, United States, 94000.

If information is incorrect, please contact fundingquestions@gene.com

Back | Save and Continue ②

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IX Confirmation

› **Submit the Funding Request**

1. If you are a member of the requesting organization and are legally authorized to sign the Letter of Agreement (LOA) on behalf of the organization, select "I am legally authorized"

2. Click "Print Preview" to print and review the funding request you are about to sign

3. Click "Submit"

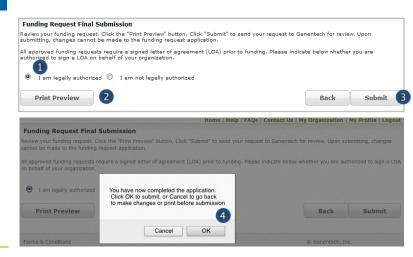4. You have now completed the application. Click OK to submit or Cancel to go back to make changes or print before submission.

>>> Or >>>

>>> Or >>>

5. If you are not legally authorized to sign the LOA on behalf of the organization, select "I am not legally authorized"

› **Enter the Organization Authorized Signer information**

   The Authorized Signer cannot be a Genentech employee

6. Enter the First name

7. Enter the Last name

8. Enter the Email address

   The email address needs to be that of the Authorized Signer specified above

9. Re-enter the Email address (confirmation)

10. Click "Print Preview" to print and review the funding request

11. Click "Submit"

12. You have now completed the application. Click OK to submit or Cancel to go back to make changes or print before submission.

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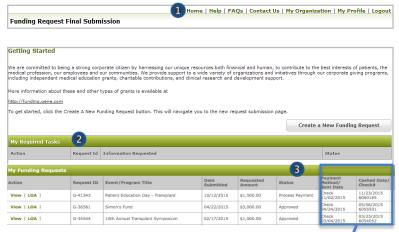## Tip Sheet

X Request Status

› **Check the Status of the request**

1. Click the "Home" tab

2. Review "My Required Tasks"
   This section lists tasks that are required from you. Example: signing the Letter of Agreement

3. Review "My Funding Requests"
   This section lists the status of your request

4. Review the payment and any check-related information
   This section will show you any information that is available for your supported programs including the payment method and date, check number, and the date the check was cashed.

   Note: If your payment method was an electronic payment (e.g. ACH), not all of the information will be populated. Payment date and cashed date are the same day.

Payment Method/ Sent Date	Cashed Date/ Check#
Check 12/09/2015	12/20/2015 / 4 6 5 7 3 8
ACH 11/23/2015	
Check 12/18/2015	
Check 11/23/2015	12/20/2015 / 4 6 5 7 3 8
Check	

Phone | 877.313.5778

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XI Respond to an RFI

› **A Request for Information (RFI) is generated by the Genentech Funding Request System when a Genentech reviewer has questions about the funding request. If an RFI is generated, you will receive an email notification describing the request sections requiring additional information. The email will be sent to the email address specified in the request**

Important: You must respond within 10 days or the request may be canceled

Getting Started

We are committed to being a strong corporate citizen by harnessing our unique resources both financial and human, to contribute to the best interests of patients, the medical profession, our employees and our communities. We provide support to a wide variety of organizations and initiatives through our corporate giving programs, including independent medical education grants, charitable contributions, and clinical research and development support.

More information about these and other types of grants is available at

http://funding.gene.com

To get started, click the Create A New Funding Request button. This will navigate you to the new request submission page.

Create a New Funding Request

My Required Tasks ①

Action	Request Id	Information Requested	Status
RFI ②	G-05655	Please respond to the RFI for Funding Request: G-05655	Open

› **To respond to an RFI, log into the Genentech Funding Request System**

1. Go to the "My Required Tasks" section

2. Click on the RFI link under the "Action" column highlighted in red
   This will open the request page

3. Click "Continue" until you have access to the fields requiring additional information

▼ Tax ID

* Where is this organization located?	United States
* Tax ID	98-7654321
* Tax status	501 (c)(3)

Continue ③

▶ Organization Detail

▶ W-9

▶ Select a Location

› **Once you have reached the section you have been asked to update, respond accordingly. Then, click "Save and Continue"**

› **To re-submit the Funding Request**

4. Confirm whether or not you are the legally Authorized Signer

5. Click "Re-Submit"

Funding Request Final Submission

Review your funding request. Click the "Print Preview" button. Click "Submit" to send your request to Genentech for review. Upon submitting, changes cannot be made to the funding request application.

All approved funding requests require a signed letter of agreement (LOA) prior to funding. Please indicate below whether you are authorized to sign a LOA on behalf of your organization.

④

◉ I am legally authorized ○ I am not legally authorized

Print Preview | **Back** | **Re-Submit** ⑤

How to apply for Scientific Project Support
Tip Sheet

XII	Sign the LOA

› **All grants must abide by the terms in the Genentech Letter of Agreement (LOA), which is issued to an Authorized Signer of the requesting organization once the application is approved. The Authorized Signer must agree to the terms of the LOA before any funding is issued**
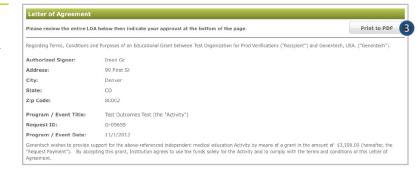
> *The LOA can only be signed by the legally Authorized Signer for the organization*

Getting Started

We are committed to being a strong corporate citizen by harnessing our unique resources both financial and human, to contribute to the best interests of patients, the medical profession, our employees and our communities. We provide support to a wide variety of organizations and initiatives through our corporate giving programs, including independent medical education grants, charitable contributions, and clinical research and development support.
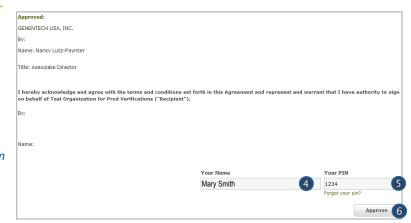
More information about these and other types of grants is available at

http://funding.gene.com

To get started, click the Create A New Funding Request button. This will navigate you to the new request submission page.

Create a New Funding Request

My Required Tasks ①

Action	Request Id	Information Requested	Status
RFI	G-05655	Please respond to the RFI for Funding Request: G-05655	Open
Letter of Agreement ②	05655	Please sign the LOA for Funding Request: G-05655	Open

› **To sign the LOA, log into the Genentech Funding Request System**

1. Go to the "My Required Tasks" section

2. Click on the Letter of Agreement link under the "Action" column highlighted in red

› **On the LOA page**

3. Click "Print to PDF" to print a copy of the LOA before accepting the LOA (optional)

Letter of Agreement

Please review the entire LOA below then indicate your approval at the bottom of the page.

Print to PDF ③

Regarding Terms, Conditions and Purposes of an Educational Grant between Test Organization for Prod Verifications ("Recipient") and Genentech, USA. ("Genentech").

Authorized Signer:	Imed Gc
Address:	99 First St
City:	Denver
State:	CO
Zip Code:	80002
Program / Event Title:	Test Outcomes Test (the "Activity")
Request ID:	G-05655
Program / Event Date:	11/1/2012

Genentech wishes to provide support for the above-referenced independent medical education Activity by means of a grant in the amount of $3,500.00 (hereafter, the "Request Payment"). By accepting this grant, Institution agrees to use the funds solely for the Activity and to comply with the terms and conditions of this Letter of Agreement.

› **Navigate to the bottom of the LOA to sign the LOA**

4. Enter your Name

5. Enter your PIN number
   This is the PIN number you created when you registered as a new user

6. Click "Approve"
   Once approved, the LOA will be accessible from the Genentech Funding Request System "Home" screen for your review
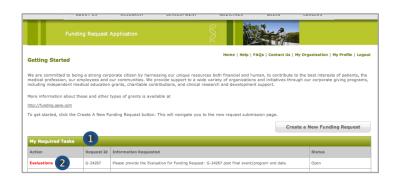
Approved:

GENENTECH USA, INC.

By:

Name: Nancy Lutz-Paynter

Title: Associate Director

I hereby acknowledge and agree with the terms and conditions set forth in this Agreement and represent and warrant that I have authority to sign on behalf of Test Organization for Prod Verifications ("Recipient").

By:

Name:

Your Name		Your PIN	
Mary Smith	④	1234	⑤
		Forgot your pin?	

Approve ⑥

How to apply for Scientific Project Support
Tip Sheet

XIII | **Evaluations**

› **Once the funding request has been approved, the grant requestor will be asked to provide an evaluation. The Evaluation page allows you to submit an attachment as necessary.**

› **To enter the Evaluations, log into the Genentech Funding Request System**

1. Go to the "My Required Tasks" section

2. Click on the Evaluations link under the "Action" column highlighted in red

› **On the Evaluations page**

3. Enter a description of the funded initiative and explain how the goals of the project were met. *If the goals of the project were not met, please explain why.*

4. Indicate if you are planning to publish the results of the funded initiative in a peer-reviewed journal

5. Indicate if the results of the study have been presented or if you are planning to present the results at any scientific meetings

6. Click on "Choose File" to select and upload a summary of the research results

7. Click "Submit"

Apply For Funding
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How to apply for Scientific Project Support
Tip Sheet

Category	Subcategory
Accreditation	▪ Accreditation Fees ▪ Certificate Fees
Association Fee	▪ Association Fee
Honoraria	▪ Chair ▪ Faculty
Hotel / Lodging	▪ Faculty ▪ Non-Physician Faculty ▪ Staff
Infrastructure	▪ Administrative Overhead ▪ Dues / Subscriptions ▪ Equipment Purchase / Lease ▪ Facility Construction / Lease ▪ Insurance ▪ Lab Expense ▪ Salaries – Contractor ▪ Salaries – Full Time ▪ Utilities
Management Fees	▪ Account & Activity Management ▪ Activity Marketing ▪ Audience Generation ▪ Content Development / Creative Development & Production ▪ Content Development / Editorial Fees ▪ Content Development / Medical Writing & Scientific Review ▪ Educational Effectiveness Measures ▪ Legal Fees
Marketing	▪ Advertising ▪ Flyers ▪ Mailings
Meals	▪ Break / Snacks ▪ Breakfast ▪ Lunch ▪ Dinner

Category	Subcategory
Miscellaneous (explain)	▪ Other (explain)
Printing & Production	▪ Brochures ▪ Handouts ▪ Invitations ▪ Mailing Lists / Labels ▪ Meeting Materials / Signage ▪ Patient Materials ▪ Programs
Screenings	▪ Lab Processing Fees ▪ Test Kits ▪ Tests
Shipping & Posting	▪ Courier Expense / Mailing Expense ▪ Office Supplies
Travel	▪ Faculty Airfare ▪ Faculty Mileage Reimbursement ▪ Faculty Train ▪ Ground Transportation / Parking ▪ Per Diem ▪ Staff Airfare ▪ Staff Mileage Reimbursement ▪ Staff Train
Venue	▪ A/V Equipment - Rental & Labor ▪ Meetings Rooms ▪ On site Meeting Support ▪ Teleconference Fees
Website Development	▪ Web Design / Functionality ▪ Website Hosting ▪ Web Maintenance