

NIH funding opportunities

15 January 2026 (#01)



Confirm your intent to apply ASAP, but not later than 60 days before the submission date.



See all Important Notices, Parent Announcements and Notice of Special Interest below

Plan your application. Before starting your application attend

- 1) Generic Grant Writing Workshop and then the
- 2) NIH Grant Writing Workshop

To prepare an application can take 4-18 months.

From submission to receiving a Notice of Award can take 10 months

Notices

NOT-OD-26-017 Research Security Training Requirements (RST) for NIH. Each listed Key Person on the application must completed RST. Completion of RST is mandatory for applications submitted for due dates on or after 25 May 2026. The condensed RST module is compliant to meet the requirements of the Federal Law. Please forward the certificate to Jason Beukes, jdbeukes@sun.ac.za and Cornelia Malherbe, cvdm2@sun.ac.za.

NOT-OD-25-104 NIH continues to support **direct foreign awards**.

NOT-OD-25-155: The primary applicant organization for complex multi-component applications (multi-component or complex application) e.g. U19 mechanism must **be located in the U.S.**

NOT-OD-25-155 New Application Structure for NIH-Funded International Collaborations

NOT-OD-26-018 NIH Implementation of Common Forms for ***Biographical Sketch and Current and Pending (Other) Support*** for Due Dates on or after 25 January 2026. Use of the Common Forms will be required for application due dates and all JIT, RPPR, and Prior Approval submissions

NOT-OD-26-019 Updated Application Policies: NIH Administrative Burden Reduction Effort – Removal of Requirements for Letters of Intent and Unsolicited Applications Requesting \$500,000 or More in Direct Costs

NOT-OD-26-025 NIH Applications Must Be Complete and Compliant with NIH Policy and Application Instructions at Time of Submission. The purpose of this notice is to remind applicants, both sponsored programs officials as well as investigators, that to be fair to all concerned the NIH will consistently apply standards for application completeness and for compliance with all submission requirements and NIH

policies. This longstanding NIH policy is outlined in NIH Grants Policy Statement [2.3.2, Eligibility](#) along with [2.4.4, Disposition of Applications](#), consistent with 2 CFR 200.204 and 200.205.

[Fogarty's director discusses an America-first global health strategy](#). An America-first global health strategy: Invest globally, benefit locally. U.S. Department of State released the “America First Global Health Strategy,” emphasizing that U.S. investments in global health should directly advance the health, security, and economic interests of Americans. NIH issued [updated guidance](#) on maximizing and safeguarding foreign collaborations, underscoring that all NIH-supported research conducted abroad should generate knowledge applicable to understanding, improving, or protecting the health of people in the United States. Together, these policies reflect a broader alignment of federal science and foreign policy—global health engagement must deliver clear value back home. **“America First” does not mean “America alone.”** The health of Americans is inseparable from the health of the world. And some of the best ideas for improving U.S. health will continue to come from our partners abroad. By embracing reciprocal innovation and designing global health research with mutual benefit at its core, Fogarty can help lead the way toward a future where scientific collaboration makes America—and the world—healthier, safer, and more resilient.

[Keep Your eRA Personal Profile Updated:](#) The Personal Profile module in eRA Commons is where you — as a principal investigator, award recipient, trainee, reviewer or other Commons user — tell NIH and other awarding agencies about yourself. Awarding agencies need to know about you to grant awards, process those awards and more. Here are a few reasons that it is extremely important to keep your Personal Profile updated.

Upcoming Opportunity

[Global Brain and Nervous System Disorders Research Across the Lifespan - Exploratory Grants \(PAR-25-456\)](#)

Notice of Funding Opportunity (NOFO)

[PAR-25-233 Dissemination and Implementation Research in Health \(R03 Clinical Trial Not Allowed\)](#) The purpose of this NOFO is to support studies that will identify, develop, and/or test strategies for overcoming barriers to the adoption, adaptation, integration, sustainability, scale-up, and spread of evidence-based interventions, practices, programs, tools, treatments, guidelines, and policies (herein referred to collectively as evidence-based interventions). Studies that promote the dissemination and implementation of evidence-based interventions among relevant communities are encouraged. Conversely, there is a benefit in understanding circumstances that create a need to stop or reduce (de-implement) the use of practices that are ineffective, unproven, low-value, or harmful. In addition, studies to advance dissemination and implementation research methods and measures are encouraged. Applications that focus on re-implementation of evidence-based health services that may be disrupted amidst disasters remain relevant. All applications must be within the scope of the mission of one of the Institutes/Centers listed.

Date: June 16, 2026; October 16, 2026; February 16, 2027. All applications are due by 5:00 PM local time of applicant organization.

Budget: A budget for direct costs of up to \$50,000 per year may be requested. The maximum project period is 2 years.

[PAR-25-143 Dissemination and Implementation Research in Health \(R21 Clinical Trial Optional\)](#). The purpose of this Notice of Funding Opportunity (NOFO) is to support studies that will identify, develop, and/or test strategies for overcoming barriers to the adoption, adaptation, integration, sustainability, scale-up, and spread of evidence-based interventions, practices, programs, tools, treatments, guidelines, and policies (herein referred to collectively as evidence-based interventions). Studies that promote the dissemination and implementation of evidence-based interventions among relevant communities are encouraged. Conversely, there is a benefit in understanding circumstances that create a need to stop or reduce (de-implement) the use of practices that are ineffective, unproven, low-value, or harmful. In addition, studies to advance dissemination and implementation research methods and measures are encouraged. Applications that focus on re-implementation of evidence-based health services that may be disrupted amidst disasters remain relevant. All applications must be within the scope of the mission of one of the Institutes/Centers listed.

Date: June 16, 2026; October 16, 2026; February 16, 2027. All applications are due by 5:00 PM local time of applicant organization.

Budget: The combined budget for direct costs for the two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in a single year.

PA-26-00 Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Parent Admin Supp Clinical Trial Optional). **Current recipients** of specific [types of NIH research grants](#) may apply for administrative supplements, using this NOFO, to provide additional funding to a currently funded grant to meet increased costs that are within the scope of the peer-reviewed and approved project, but that were unforeseen when the new or competing renewal application was awarded. Applications for administrative supplements are considered prior approval requests (as described in [Section 8.1.2.11 of the NIH Grants Policy Statement](#)) and will be routed directly to the Grants Management Officer of the parent award. There is no guarantee that funds are available from the awarding IC or for any specific grant. Therefore, prior to submission, applicants must discuss potential requests with the awarding ICO grants and program officials.

Date: Due dates may vary by awarding IC. See Administrative Supplements on the NIH Grants & Funding site for IC-specific information including any special due dates. Applicants may also contact their respective awarding IC

Budget: Application budgets are limited to no more than the amount of the current parent award and must reflect the actual needs of the proposed project. The project and budget periods must be within the currently approved project period for the existing parent award. Administrative supplements are not permitted during a no-cost extension.

PAR-25-242 Mobile Health: Technology and Outcomes in Low and Middle Income Countries (R21/R33 - Clinical Trial Optional). The purpose of this NOFO is to encourage exploratory/developmental research applications that propose to study the development, validation, feasibility, and effectiveness of innovative mobile health (mHealth) interventions or tools specifically suited for low- and middle-income countries (LMICs) that utilize new or emerging technology, platforms, systems, and/or analytics. The overall goal of the program is to catalyze innovation through multidisciplinary research that addresses global health problems, develop an evidence base for the use of mHealth technology to improve clinical and public health outcomes, and strengthen mHealth research capacity in LMICs. This NOFO provides support for up to two years (R21 phase) for technology development and feasibility studies, followed by a possible transition to expanded research support (R33 phase) for validation, larger-scale feasibility, and effectiveness studies. Transition to the R33 depends on the completion of applicant-defined milestones, as well as program priorities and the availability of funds. All applicants must address both the R21 and R33 phases.

Date: March 21, 2025 & March 20, 2026. All applications are due by 5:00 PM local time of applicant organization.

Budget: The R21 phase may not exceed \$125,000 in direct costs in any single year of the R21 phase. The R33 phase may not exceed \$200,000 in direct costs in any single year of the R33 phase. The project period is limited to 2 years for the R21 phase and up to 3 years for the R33 phase. The total project period may not exceed 5 years.

PAR-24-174 Global Infectious Disease Research Training Program (D43 Clinical Trial Optional). This Funding Opportunity Announcement encourages joint applications for the Global Infectious Disease (GID) Research Training programs from low- and middle-income country (LMIC) and U.S. institutions. The application should propose a collaborative training program that will strengthen the capacity of a LMIC institution to conduct infectious disease research (not including HIV/AIDS). FIC will support research training programs that focus on 1) major endemic or life-threatening emerging infectious diseases, 2) neglected tropical diseases, 3) infections that frequently occur as co-infections in HIV infected individuals or 4) infections or microbiomes associated with non-communicable disease conditions of public health importance in LMICs. Advanced scientific training related to prevention, treatment or public health approaches to any technical area of basic, epidemiological, clinical, behavioral or social science health research may be supported. Research training programs should incorporate didactic, mentored research and professional development skills components to prepare individuals for sustainable careers that will have significant impact on the priority health research needs of LMICs.

Date: August 06, 2026. All applications are due by 5:00 PM local time of applicant organization

Budget: Application budgets are limited to \$230,000 per year for new awards (total direct costs). The maximum project period allowed is 5 years.

PAR-26-116 Opportunities for Collaborative Research at the NIH Clinical Center (U01 Clinical Trial Optional). The goal of this program is to support collaborative translational research projects aligned with NIH efforts to enhance the translation of basic biological discoveries into clinical applications that improve health. It encourages high quality science demonstrating the potential to result in understanding an important disease process or lead to new

therapeutic interventions, diagnostics, or prevention strategies within the research interests and priorities of the participating NIH Institutes/Centers (ICs). The program seeks to broaden and strengthen patient-centric translational research collaborations between basic and clinical researchers both within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural investigators (e.g., those conducting research within the labs and clinics of the NIH) and extramural investigators (e.g., those conducting research in labs outside the NIH), and by providing support for extramural investigators to take advantage of the unique research opportunities available at the NIH Clinical Center by conducting clinical research projects in collaboration with NIH intramural investigators.

Date: February 05, 2027. All applications are due by 5:00 PM local time of applicant organization.

Budget: Application budgets need to reflect the actual needs of the proposed project. The maximum amount available per application is \$500,000 direct costs per year; this amount includes extramural recipient costs, Clinical Center costs and intramural investigator's costs attributed to the proposed research project. The total of all three types of cost must not exceed \$500,000 (direct costs) per year. The scope of the proposed project should determine the project period. For projects that do not need a planning year, the maximum project period is 4 years. If the project needs to include a planning year as part of the research plan, a fifth year can be proposed (grant year 1) at a reduced budget level.

Faculty of Medicine and Health Sciences

Research & Internationalisation Development & Support (RIDS) & Grants Management Office (GMO)

009 Kth Floor, Teaching Block, Tygerberg Campus.

Enquiries: fmhsgmo@sun.ac.za

Add “*Interest in NIH opportunity*” in the subject line.

Add the *notice number with hyperlink* in the text of the email.