The goal of this application is to allow the reviewer to understand the core at a high level. Please provide only the information requested. Extraneous narrative or graphs will result in the application being returned for revision.

**A. Overview**

Provide a brief description that will allow the reviewer to grasp the core’s general purpose. This section should be no longer than one page, and should include:

* A brief history of the core including year created,
* A broad statement of the needs addressed by the core (mission statement).

**B. Academic Governance**

1. Name the faculty member that provides direct guidance to the core. Note the percent salary support (if any) they receive from the core and the title that they hold (e.g. faculty advisor, faculty director).
2. List the members of the core’s scientific advisory committee and name the chairperson. List the dates of all advisory committee meetings during the past year. For each meeting briefly describe any key decisions or recommendations that were made by the committee (bullet points are sufficient). Do not include routine business.
3. Describe any change in academic governance in the past year (e.g committee members).

**C. Administrative Structure**

1. Name the person who is responsible for the day-to-day operation of the core. Note their percent effort in the core and the title that they hold (core director, operations manager, etc.)
2. Name the Department or Center in which the core’s recharge account is located.
3. Describe any administrative support the core receives from the host department or center (e.g. billing, payroll, ordering).
4. Describe any change in the administrative structure in the past year.

**D. Personnel List**

1. Provide a list of core personnel.

|  |  |  |
| --- | --- | --- |
| Name | % Effort in Core | Primary Responsibility (20 words or less) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Note any changes in personnel in the past year and describe the impact of these changes on the core’s operation.
2. Describe any other staffing challenges the core faces.

**E. Facilities and Location**

1. List all University-controlled space occupied by the core. “Space Assignee” is the department or center to which the space is currently assigned.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Campus* | *Building* | *Room #* | *Sq. Ft.* | *Space Assignee (department/center)* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. If the core uses space, facilities or instruments that are located outside of the University please describe these.
2. Describe changes to space in the last year.

**F. Instruments**

Provide a list of equipment that is either:

1. Available for use on a fee-for-service basis,
2. A specialized instrument central to providing the core’s basic services (e.g. sequencer, mass spec, flow cytometer).

***DO NOT LIST COMMON LABORATORY EQUIPMENT.***

|  |  |  |  |
| --- | --- | --- | --- |
| *Equipment Name* | *Capital Tag* | *Purchase date* | *Lifetime* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**G. Services**

1. List broad service areas provided on a fee for service basis. Examples would be “Cell Sorting” or “Tissue Sectioning”. Do not provide a list of individual services.
2. List all services provided without charge. These may include services provided as a courtesy (e.g. software access) or time & resources spent in anticipation of revenue-generating activity (initial consultations, pilot experiments). If services are provided free of charge as a part of the core’s mission (i.e. the service is fully subsidized), describe this arrangement.
3. Note any new services that have been added since the last budget request.
4. Note any services that have been discontinued since the last budget request.

Since the last budget request, have commercial alternatives to any core services become available or have existing alternatives become more cost-effective or more available? The core is **REQUIRED** to make this assessment yearly.

**H. Utilization**

Complete the workbook entitled *FY26\_core\_utilization\_template*. Most cores will paste data exported from NUcore but it can also be entered manually. Guidance for completing the utilization workbook is provided in the document entitled *FY26\_core\_utilization\_guide*.

**I. Budget**

1. Complete the workbook entitled *FY26\_core\_budget\_template*. Guidance for completing the budget spreadsheet is provided in the document entitled *FY26\_core\_budget\_guide*.
2. Provide a narrative description of the budget. Although financial detail should be reserved for the spreadsheet, several specific points should be addressed in this section.
3. Do you expect to meet your FY25 projections (from last year’s application) for recharge revenue? If not, please explain the circumstances that led to this shortfall.
4. Have you added or lost any sources of funding in your FY26 budget when compared to your FY25 budget?
5. Has your support from Northwestern organizations (e.g. departments, centers) changed in the last year?
6. Beginning this year the financial position of cores within FSM can be viewed at the following link:

<https://tableau.northwestern.edu/t/FSM/views/Cores-FinancialPosition/Graphs?:embed=y>

By default the core director and relevant center administrative staff have access. Additional access can be granted on request. Please see the *FY26\_Financial\_Dashboard\_Guide* for help in understanding the dashboard. Referencing the dashboard linked above, address the following points.

* 1. If your core had a Net Position of more than 2 months carryover for FY24, do you expect to fall below this required maximum by the end of FY25?
	2. If your core’s Net Position in FY24 reflected a deficit of more than 5% of your Recharge Revenue, do you expect this accrued deficit to grow, remain the same, or increase by the end of FY25? If it will remain the same or grow, please describe your plan to eliminate the deficit beginning in FY26.

**J. Funding Request and Justification**

FSM provides operational support to subsidize services that would otherwise be unaffordable. Specifically, operating support is intended to cover the difference between the true cost of providing a service and the maximum that investigators can reasonably afford to pay. Note that affordable does not mean inexpensive. Rates should be as close to the full cost as possible without preventing investigators from utilizing the service. Funds are intended primarily for cores within FSM but cores outside of FSM can apply based on specific criteria.

**For cores whose recharge chartstring (160 account) is located in a Feinberg department or center:**

1. Project the net position (surplus/deficit) in the recharge account in the absence of FSM support.
2. Identify the primary contributors to any deficit. For example, are specific services more expensive to provide than can reasonably be charged to the investigator? Are there specific fixed costs (e.g. a large service contract) that cannot be fully recovered through recharge?
3. List other sources of income if any (e.g. funding from center grants) and note whether the income is limited to specific expenses or users (e.g. cancer center support for cancer center members). In most cases these revenue sources should also appear in the budget spreadsheet.
4. Specify the dollar request you are making to FSM and describe how you arrived at this amount. **BE SPECIFIC.** Requests without a quantitative calculation of the need will not be considered.

**For cores whose recharge chartstring is not located in a Feinberg department or center:**

1. Cores that derive more than **50%** of their revenue from payment sources located in FSM (i.e the default NUcore department assignment is in FSM) can apply using the same criteria as FSM cores. The percents are available on the Summary tab of the utilization workbook that is part of this application.
2. For all other cores, operating funds can be requested only to cover the added cost of providing services to Feinberg investigators when compared with non-Feinberg investigators. Please describe the specific added costs and how they were used to calculate the operating request.

**K. Publications and Grants**

To help understand the impact of your core on research at Northwestern:

1. List up to 3 publications that display work produced in the core.
	1. ***We are looking for highlights, not exhaustive lists.***
	2. Describe the core’s contribution to each publication in one to two sentences.
2. List up to 3 awards or proposals that contain work produced in the core.
	1. ***We are looking for highlights, not exhaustive lists.***
	2. Briefly describe the core’s contribution to each award or proposal.
3. List all internal and external equipment grants submitted by the core

**L. Communication and Outreach Activities**

Describe the core’s strategy to make existing users aware of activities in the core and attract new users both within and outside of the institution. For example:

* What is the core’s primary website? When was it last updated?
* How often and via what channels does the core communicate with its users and potential users?
* How else does the core help new customers to find them?

**M. Challenges/Self-Assessment/Goals**

Please be thoughtful about the following topics.

1. List 1-3 areas where the core has struggled in the past year. Examples include:
	1. Issues raised in the annual user survey,
	2. Issues raised in your FSM funding letter from last year (if applicable),
	3. Capabilities that are needed by users but are difficult or too expensive to provide.
2. Describe steps the core has taken to address these issues and/or list planned steps in the Goals table (below).
3. List any upcoming challenges for the core that you are aware of, describe the time frame (e.g. next 6 months, next 3 years) and in just a few sentences describe steps you are taking to prepare. For example:
	1. Technology shifts
	2. New competitors in the market
	3. Instrument end of life
4. List previous and future goals. For “Progress/Accomplishments”, be quantitative when possible.

|  |  |
| --- | --- |
| Goals as reported for FY25 | Progress/Accomplishments |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| Goals for FY26 and beyond |
|  |
|  |
|  |
|  |

**N. Advisory Committee Approval**

As chair of the advisory committee, I certify that the committee has reviewed and approved this report.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chair Signature Date

PLEASE EMAIL THE COMPLETED APPLICATION TO Jeff-weiss@northwestern.edu.