



**New Jersey Commission on Brain Injury Research  
 QUALIFIED RESEARCH INSTITUTION  
 REQUEST FOR APPROVAL**

The New Jersey Commission on Brain Injury Research requires that the organization or institution of a grant applicant be approved as a qualified research institution *prior to the submission of a grant application*.

If your organization or institution appears below, you do not need to submit this document. Those organizations or institutions that have *not* been approved, and are not listed below, must apply.

**Qualified Institutions**

- |  |  |
|--|--|
| Rutgers, The State University of New Jersey  | University of Medicine and Dentistry of New Jersey (now Rutgers Univ.)   |
| Kessler Medical Rehabilitation Center <sup>9/16/06</sup>   | Kessler Foundation <sup>9/16/06</sup>  |
| Coriell Institute for Medical Research <sup>9/16/06</sup>  | New Jersey Institute of Technology <sup>9/16/06</sup>  |
| Hackensack University Medical Center <sup>9/16/06</sup>  | Morristown Medical Hospital and Medical Center <sup>11/10/09</sup><br>(now part of Atlantic Health Systems Hospital Corporation) |
| Stevens Institute for Technology <sup>9/16/06</sup>  | International Brain Research Foundation <sup>12/7/09</sup>   |
| Cooper University Hospital/Health System <sup>12/7/09</sup>  | Englewood Hospital Research <sup>12/7/09</sup>   |
| Princeton University <sup>12/7/09</sup>  | CentraState Medical Center <sup>3/15/11</sup>  |
| Rowan University <sup>12/13/11</sup>   | Saint Barnabas Medical Center <sup>10/11/11</sup>  |
| Edge Therapeutics, Inc. <sup>12/14/10</sup>  | VA NJ Health Care System and Veterans Biomedical Research Institute  |
| Atlantic Health Systems Hospital Corporation <sup>12/7/09</sup><br>(Atlantic Health Care System Neuro. Institute)  | JFK NJ Neuroscience Institute, JFK Health System and Seton Hall University School Health Medical Science <sup>12/07/09</sup>     |
| The Center for Neurological and Neurodevelopment Health II, Inc., The Center for Neurological and Neurodevelopment Health LLC, Clinical Research Center of NJ, and NeurAbilities <sup>10/11/11</sup> | Montclair State University <sup>9/15/15</sup>  |
| St. Joseph's University Medical Center <sup>9/18/18</sup>  | The College of New Jersey <sup>9/15/15</sup>   |
| Bright Cloud International Corp. <sup>6/16/20</sup>  | Visikol, Inc. <sup>9/20/16</sup>   |
|  | William Paterson University of New Jersey <sup>7/24/2019</sup>   |

The completed form can be sent electronically to [NJCBIR@doh.nj.gov](mailto:NJCBIR@doh.nj.gov) or by mail to The New Jersey Commission on Brain Injury Research, 369 South Warren St., P.O. Box 360, Trenton, New Jersey 08625-0360. If you have questions related to the completion of this form, please call the Commission office at 609-633-6465.

**Name of Institution/Organization:** \_\_\_\_\_

- Is this Institution/Organization capable of receiving and administering federal and state grants?**  
 Yes     No
- Does this institution/organization have a Grant Administration Office (or equivalent) that is responsible for overseeing grant programs?**  
 Yes     No

**IF YES**, please list the grant administrator's name, address, and phone number:  
first / middle / last

Administrator's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Room: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**QUALIFIED RESEARCH INSTITUTION  
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(Continued)**

**IF NO**, please explain what type of fiscal oversight structure your institution or organization has in place:

**3. What type of grants does the institution/organization hold?** Please check those that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> National Institutes of Health (NIH) | <input type="checkbox"/> National Science Foundation (NSF) |
| <input type="checkbox"/> State or other Government Agencies  | <input type="checkbox"/> Private and Corporate Foundations |
| <input type="checkbox"/> Other (please specify):             |  |

**4. Does your institution/organization provide for the protection of human subjects, animal welfare, and recombinant DNA molecules as regulated by the National Institutes of Health?**

- Yes       No

**IF NO**, please explain:

**5. Does this institution/organization have in place an Institutional Review Board (IRB) that will approve proposed research?**

- Yes       No

**6. Please provide information on any ongoing funding that the institution/organization receives in regard to grants.** (Attach additional sheets if necessary.)

**7. Please provide information on any affiliation agreements with any other institutions/organizations that the institution/organization may be an affiliate of.** (Attach additional sheets if necessary.)