

# Reticular Fellows Research Grant

HOW TO APPLY · FOR REI FELLOWS · 2027 CYCLE



PAGE 1 OF 2

| THE AWARD                                                                    | APPLICATIONS OPEN                   | APPLICATION DEADLINE              | RECIPIENT ANNOUNCED              |
|------------------------------------------------------------------------------|-------------------------------------|-----------------------------------|----------------------------------|
| <b>\$10,000</b><br>+ optional genomics and bioinformatics for up to 50 cases | <b>Oct 26, 2026</b><br>at ASRM 2026 | <b>Dec 1, 2026</b><br>11:59 PM ET | <b>Dec 15, 2026</b><br>one award |

## WHAT YOU SUBMIT

One PDF · Arial 11 pt · margins ≥ 0.5 in

The proposal — up to four pages, in this order.

- 1 **Problem statement** — about 150 words. What you will investigate, and what changes if you are right.
- 2 **Background and significance** — ¼ page. What is known, what is not, and where your question sits.
- 3 **Aims and research questions** — ½ page. The overarching goal, then the questions, numbered.
- 4 **Methods** — 1¼ pages. Case selection, data collection, and analysis. Say which cases you have, what samples (biobanked blood or saliva) and data already exist for them, and what you want sequenced.
- 5 **Timeline** — ½ page. By month, through to the meeting you would present at.

Plus three attachments.

- 1 **Cover sheet** — page 2 of this PDF. Put it first.
- 2 **CV or NIH biosketch** — up to 2 pages. Whichever you already have.
- 3 **Mentor letter** — up to 1 page. Confirming your mentor will serve as PI of record and support your time on the project.

Email one PDF to [christina@reticular.com](mailto:christina@reticular.com), subject **Fellows Research Grant — [Your Full Name]**, by 11:59 PM ET, December 1, 2026. Questions first? Book a 30-minute call: [cal.com/christina-reticular/30min](https://cal.com/christina-reticular/30min).

## HOW IT IS REVIEWED

Applications are reviewed by our clinical and scientific advisors, including Sara Vaughn, MD, former medical director of Spring Fertility Silicon Valley.

|                     |                                                                                                                            |    |
|---------------------|----------------------------------------------------------------------------------------------------------------------------|----|
| <b>Significance</b> | Does the question matter to patients, and could the answer inform counseling or care?                                      | 25 |
| <b>Approach</b>     | Can the design answer the question with genomic data — our analysis or your own — and is the analysis plan set in advance? | 30 |
| <b>Feasibility</b>  | Can you finish this in about 12 to 18 months, given your cases, samples, and training timeline?                            | 25 |
| <b>Environment</b>  | Mentorship, access to cases and samples, statistical support, institutional capacity to execute.                           | 20 |

Reviewers step aside from any proposal from an institution they are affiliated with. Selection and the award do not depend on whether you, your mentor, or your program order Reticular's clinical tests, now or later.

# Application cover sheet

PLACE THIS PAGE AT THE FRONT OF YOUR PDF



PAGE 2 OF 2

## 1 PROJECT

PROJECT TITLE

EXISTING GENETIC DATA FOR YOUR CASES  
(E.G. PGT-A OR POC)?

☐ Yes ☐ Partly ☐ No

BIOBANKED BLOOD OR SALIVA FROM THE  
ADULTS IN YOUR CASES?

☐ Yes ☐ Some ☐ No

WILL YOUR PROJECT USE THE OPTIONAL  
GENOMIC ANALYSIS?

☐ Yes ☐ Unsure ☐ No

APPROX. CASES YOU COULD INCLUDE

EXPECTED IRB APPROVAL (MO / YR)

OTHER FUNDING HELD OR APPLIED FOR

## 2 APPLICANT – THE FELLOW

NAME AND DEGREES

FELLOWSHIP YEAR

☐ 1 ☐ 2 ☐ 3

ACGME-ACCREDITED REI FELLOWSHIP PROGRAM

TRAINING ENDS (MO / YR)

EMAIL

MOBILE

PROTECTED RESEARCH MONTHS LEFT

## 3 FACULTY MENTOR – PRINCIPAL INVESTIGATOR OF RECORD

NAME AND DEGREES

TITLE

EMAIL

DEPARTMENT / DIVISION

## 4 PROGRAM DIRECTOR

NAME

EMAIL

No letter is needed from your program director.

## 5 APPLICANT ATTESTATION

I confirm the proposal is my own work, that my faculty mentor has agreed to serve as principal investigator of record, and that I understand no funds are paid to me personally.

FELLOW – SIGNATURE

DATE