**Preview of AIMS application**

|  |
| --- |
| * **1. Investigator Information**   *Your contact information is used to provide updates about your application.*   * Name\*   First  Last   * Institution\*   Department\*  Job Title\*  Email\*  Phone\*   * How did you hear about us?   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   * **2. Project Information**   *Share your goals and explain the potential impact of your research project.*   * Research Area\*   *Please select...*  Animal Health  Biotechnology  Cardiology and Vascular Diseases  Dental and Oral Health  Dermatology  Endocrinology and Metabolism  Gastroenterology  Hematology  Hepatology (Liver, Pancreatic, Gall Bladder)  Immunology  Infectious Diseases  Musculoskeletal  Nephrology  Neurology  Obstetrics and Gynecology  Oncology  Ophthalmology  Plant Biology and Plant Diseases  Psychiatry and Psychology  Pulmonary and Respiratory Diseases  Rare Diseases and Disorders  Rheumatology  Sleep Disorders  Surgery and Trauma  Toxicology  Urology  Vaccines  Other   * Disease or Condition of Interest\*: * Protein Target of Interest\*: * What is the role or significance of the protein target in the disease?\* * What is the purpose or potential impact of a small molecule intervention?\*   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   * **3. Protein Information**   *Protein details tell us how to perform a virtual screen for your target.*   * Uniprot ID (link):\* * PDB ID (link):\* * Residues of target binding site: * Papers that describe the protein structure, binding sites, etc.   Please attach relevant papers or files   * Comments or additional guidance   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   * **4. Small Molecule Information**   *Help us deliver molecules with the properties you prefer.*   * Are there known ligands that bind to the target protein?   Yes  No  Don't know   * If yes, please upload structures (e.g. SMILES, Chemdraw, SDF, MOL, MOL2) * OR provide ligand names. * Do you prefer any of the following features? * *Oral availability*   Yes  No  Don't know   * *Blood-brain barrier permeability*   Yes  No  Don't know   * *Chemotype or toxicophore exclusion*   Yes  No  Don't know   * *Particular properties related to selectivity*   Yes  No  Don't know   * *Other requirements*   Yes  No  Don't know   * Comments or additional guidance   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **5. Assay Information**  *Tell us about the testing plan for the compounds you will receive.*   * Will you test molecules in a chemical / protein assay?   Yes  No  Don't know   * Will you test molecules in a cell-based assay?   Yes  No  Don't know   * Comments or additional guidance |
|  |