

**Southwest Health Equity Research Collaborative  
PILOT PROJECT PROGRAM**

**Track I (Preliminary Studies Award)**

**Track II (Resubmission Award)**

**Date of Submission:**

**Total Amount Requested:**

**Title of Project:**

**Investigator Name (Last, First):**

**Email:**

**Phone:**

**Dept./School:**

**College:**

**Academic Title:**

**Abstract**

Provide an abstract for the proposed work that can be understood by a person not familiar with your discipline (limit 250 words).