

Poster Submission Form

*11th Annual Johns Hopkins Bayview Research Symposium
Friday, December 16, 2016*

In order for an abstract to be considered for the Johns Hopkins Bayview Research Symposium, this form must be completed. Once completed, **please return this form and your abstract in Microsoft Word format to BayviewViceDean@jhmi.edu** by Friday, December 2, 2016. Please contact Kirsten Gercke at 410-550-0517 if you have any questions regarding your abstract or this form. Thank you!

FULL Author List: _____

Example: Doe, John; Doe, Jane; Smith, Joe. (Please give first and last name)

Abstract Title: _____

(Title Caps, NOT ALL CAPS)

Department/ Division (as it should be listed in the Symposium brochure): _____

(ALL CAPS)

*Contact Person(s): _____

Contact phone number: _____

Contact email: _____

PLEASE NOTE: INCOMPLETE FORMS WILL NOT BE ACCEPTED.

Maximum poster size should be 48 inches wide x 36 inches tall. Poster locations will be assigned in advance and poster set up will begin on Thursday, December 15th.

PASTE YOUR ABSTRACT TEXT IN THIS SPACE (1-2 paragraphs).