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Page 1 of 2

American Physiological Society
Meetings Department • 9650 Rockville Pike • Bethesda, MD 20814

EB 2011 Cross-Sectional Symposium Proposal Form
Deadline: February 15, 2010

Instructions: Complete this form and email to Linda Allen: lallen@the-aps.org by the deadline listed above for consideration for the EB meeting. Cross sectional symposia are 2 hours in length and must be of interest to more than two APS sections/groups. The APS provides funding of \$4,000 which is distributed among the presenters at the discretion of the organizer/chair.

- A. Symposium Title:**
- B. Organizer/Chair's Name:**
Organizer/Chair's Address:
Phone/fax/email:
- C. Session description and goal** (what is session about, who will attend, why is it necessary):

D. Indicate those APS sections/groups or EB Participating Societies that would have interest in this session:

- | | |
|--|--|
| <input type="checkbox"/> Animal Care Committee | <input type="checkbox"/> Muscle Biology Group |
| <input type="checkbox"/> Cardiovascular Section | <input type="checkbox"/> Neural Control & Autonomic Regulation Section |
| <input type="checkbox"/> Careers in Physiology Committee | <input type="checkbox"/> Physiological Genomics Group |
| <input type="checkbox"/> Cell & General Physiology Section | <input type="checkbox"/> Public Affairs Committee |
| <input type="checkbox"/> Central Nervous System Section | <input type="checkbox"/> Publications Committee |
| <input type="checkbox"/> Comparative & Evolutionary Physiology Section | <input type="checkbox"/> Renal Section |
| <input type="checkbox"/> Education Committee | <input type="checkbox"/> Respiration Section |
| <input type="checkbox"/> Endocrinology & Metabolism Section | <input type="checkbox"/> Teaching of Physiology Section |
| <input type="checkbox"/> Environmental & Exercise Physiology Section | <input type="checkbox"/> Trainee Advisory Committee |
| <input type="checkbox"/> Epithelial Transport Group | <input type="checkbox"/> Translational Research Group |
| <input type="checkbox"/> Gastrointestinal & Liver Physiology Section | <input type="checkbox"/> Water & Electrolyte Homeostasis Section |
| <input type="checkbox"/> History of Physiology Group | <input type="checkbox"/> Guest Society: _____ |
| <input type="checkbox"/> Hypoxia Group | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Liaison with Industry Committee | |

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Page 2 of 2

E. Presenters/Discussants:

Be sure to allow sufficient time for discussion. Please consider the inclusion of women and under-represented minority groups as well as researchers working in industry. Use full names of speakers (not initials) and provide complete mailing and email address.

Speaker #1 Name:

Address:

Phone/fax/email:

Title of Presentation:

Presentation Time Allotment (minutes)

Has participation been confirmed (YES/NO)?

Speaker #2 Name:

Address:

Phone/fax/email:

Title of Presentation:

Presentation Time Allotment (minutes)

Has participation been confirmed (YES/NO)?

Speaker #3 Name:

Address:

Phone/fax/email:

Title of Presentation:

Presentation Time Allotment (minutes)

Has participation been confirmed (YES/NO)?

Speaker #4 Name:

Address:

Phone/fax/email:

Title of Presentation:

Presentation Time Allotment (minutes)

Has participation been confirmed (YES/NO)?