

# Duquesne University Undergraduate Research Program

## 2005 Summer Research Symposium Abstract Submission and R.S.V.P. Form All forms must be received by Thursday, July 13, 2005

Name of Submitting Author: \_\_\_\_\_

I am:  Undergraduate Student  Graduate Student  Faculty

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

University Currently Attending: \_\_\_\_\_

University/ Site of Research: \_\_\_\_\_

Will you be attending the picnic lunch?  Yes  No

Research Mentor: \_\_\_\_\_ Mentor's Phone: \_\_\_\_\_

University & Dept. or Company Affiliation: \_\_\_\_\_

Will your Mentor be attending the picnic lunch?  Yes  No

I will submit an abstract for the poster session by:  Email  Disk

Abstracts must be submitted by email to [urp@duq.edu](mailto:urp@duq.edu). If abstracts are emailed, please do not return this form in addition. Include the following information: title, author(s), location of research, and the abstract. Abstracts must be no longer than 150 words in length. Posters must fit in a 4' x 4' space.

Would you like to be considered for the Plenary Session?  Yes  No

Other Participants who would like to attend the picnic: (Include Full Names, Dr. Thomas R. Weber)

Name: \_\_\_\_\_  Undergraduate  Graduate  Faculty

Phone: \_\_\_\_\_ University: \_\_\_\_\_

Name: \_\_\_\_\_  Undergraduate  Graduate  Faculty

Phone: \_\_\_\_\_ University: \_\_\_\_\_

Name: \_\_\_\_\_  Undergraduate  Graduate  Faculty

Phone: \_\_\_\_\_ University: \_\_\_\_\_

Name: \_\_\_\_\_  Undergraduate  Graduate  Faculty

Phone: \_\_\_\_\_ University: \_\_\_\_\_