



CGC 2020 TRAINEE OR TECHNOLOGIST CONFIRMATION FORM

FOR:

**Student Membership Applicants
Student Meeting Registrations
Abstract Submissions for both Trainees and Technologists**

Please submit this signed confirmation form along with your membership registration, meeting registration, or abstract submission. Please print information legibly.

Only one form needed per person per calendar year.

Trainee/Technologist Name: _____ Degree(s): _____

Address, City, State, Country, Postal Code: _____

Work Phone: _____ Mobile Phone: _____

Email Address: _____

If Trainee, Training Program Description: _____

Please have your Mentor/Trainer/Supervisor complete the following:

Mentor/Trainer/Supervisor: _____

Institution: _____

Address, City, State, Country, Postal Code: _____

Work Phone: _____ Mobile Phone: _____

Email Address: _____

I confirm _____ (Trainee/Technologist Name) is currently:

_____ enrolled in a training program, OR

_____ is working as a technologist,

at my institution and therefore qualifies for a CGC 2020 Annual Meeting Outstanding Trainee or Technologist Award, or a reduced rate for CGC membership and/or event registration.

Mentor/Trainer Signature: _____

Please upload this completed form with your abstract submission (February 25, 2020 Deadline), or send it within 15 days of your membership or meeting registration OR within 48 hours of your abstract submission to:

Karla Gay at karla@cancergenomics.org