

# *Abstract Submission Approval*

I, \_\_\_\_\_, would like to submit the abstract:

" \_\_\_\_\_ ",

for presentation at the meeting, \_\_\_\_\_,

which will be held at \_\_\_\_\_,

on the dates \_\_\_\_\_ — \_\_\_\_\_.

*(if applicable)* \_\_\_\_\_ has agreed to

**Name of third party support**

pay \$ \_\_\_\_\_ towards my total expenses.

**Resident's signature**

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The above named resident has approval to submit this abstract in the hopes of presenting it at the above-mentioned meeting. If accepted, the resident will secure proper service coverage, and his/her expenses will be reimbursed by the Resident Education Fund provided they are in accordance with the guidelines found in the Resident's Manual.

\_\_\_\_\_  
Daniel W. Nuss, MD FACS  
Chairman

\_\_\_\_\_  
Peter L. Rigby, MD  
Director, Resident Education