

Abramson Cancer Center of the University of Pennsylvania
Membership Application Form
(Please submit Electronically)

Date of Application: _____

I. General Profile

Name (first, middle, last): _____
Degree(s): _____
Faculty Appointment: _____
Admin Titles (if applicable): _____
Research Expertise: _____
Clinical Expertise (if applicable): _____
Campus address: _____
Telephone number: _____
Fax number: _____
Email address: _____

II. Category of Membership for which you are applying

- Member (Full)**
Subcategories:
 - Research Investigator. Must be a PI or Co-PI on at least 1 cancer-related peer-reviewed and funded research project award (may be waived for 2 years for a new junior faculty) and have cancer related peer-reviewed publications within the last three years.
 - Clinical Investigator. Must have authorship of cancer-related clinical trials and/or accrual of patients to cancer related clinical trials and/or have a leadership role in cooperative group studies.
- Associate Member**
Faculty and staff involved in fulfilling the cancer mission of the Abramson Cancer Center either research, education, dissemination or care who do not currently meet the requirements of cancer-related funding, publications or clinical trials.
- Emeritus/Honorary Member**
Department Chair or Institutional leader who is not actively involved in cancer research but frequently collaborates with the Cancer Center on selected initiatives and is viewed by Cancer Center leadership as instrumental in achieving the Cancer Center's research mission.

III. Please describe your current Cancer-related Research

III. Please provide electronic copies of the following documents with your application:

- a) Curriculum Vitae **and** NIH Biosketch, including an up-to-date list of publications.
- b) List of Grant Support: Please provide a list of active and pending grant support (research and training). Include grants for which you are either the Principal Investigator or Co-Investigator.
- c) Additional information you believe will assist in the evaluation of your application.

IV. Appointment to Research Programs

Listed below are the 11 Research Programs of the Abramson Cancer Center. Please select the primary research program that best matches your scientific interests. (See application instructions for descriptions)

- | | |
|--|---|
| <input type="checkbox"/> Breast Cancer | <input type="checkbox"/> Hematologic Malignancies |
| <input type="checkbox"/> Cancer Prevention and Control | <input type="checkbox"/> Radiation Biology |
| <input type="checkbox"/> Cancer Therapeutics | <input type="checkbox"/> Tobacco and Environmental Carcinogenesis |
| <input type="checkbox"/> Immunobiology | <input type="checkbox"/> Tumor Biology |
| <input type="checkbox"/> Melanoma | <input type="checkbox"/> Tumor Virology |
| <input type="checkbox"/> Pediatric Oncology Research | <input type="checkbox"/> Not programmatically aligned |

V. I would like to receive electronically:

- ACC Events Bulletin (e-published every 2 weeks)
- ACC Cancer Beacon (Newsletter, e-published every 2-3 months)
- ACC Announcements and News
- Program Listserve (when available)

**Return to: Barbara Vance, Abramson Cancer Center of the University of Pennsylvania
1620 Penn Tower, tel: (215) 349-8387, fax: (215) 349-8299
e-mail: vanceb@mail.med.upenn.edu**