

The University Seminars at Columbia University

**CURRICULUM VITAE
for Nomination of Associate Member**

(All information must be entered on form—please make no attachments)

DATE: _____

UNIVERSITY SEMINAR ON _____

NAME: _____

HOME ADDRESS: _____

OFFICE ADDRESS: _____

E-MAIL ADDRESS: _____

TELEPHONE: _____
(home) (office)

*SOCIAL SECURITY NUMBER: _____

EXACT TITLE OF PRESENT POSITION, INCLUDING INSTITUTION:

ACADEMIC DEGREES INSTITUTION YEAR

SELECTED PUBLICATIONS (continue on reverse):

HAVE YOU HAD A PREVIOUS APPOINTMENT AT COLUMBIA? YES NO

If "YES:" DEPARTMENT TITLE DATE

* Social Security Number (SSN) is used to produce I.D. cards; an I.D. card cannot be issued without SSN.

**PLEASE RETURN THIS FORM TO THE SEMINAR CHAIR
FOR SUBMISSION WITH LETTER OF NOMINATION.**