



## BRAINS IN A DISH

### Central Virginia Chapter of the Society for Neuroscience 2016 Annual Symposium and Poster Session

**March 25<sup>th</sup>, 2016, 9:00am-6:00pm**

at Jordan Hall Conference Center, University of Virginia  
1340 Jefferson Park Ave, Charlottesville, VA 22903

#### Invited Speakers:

**David Kaplan, Ph.D.** Tufts University

**Erin Foff, M.D., Ph.D.**, University of Virginia

**Doo Yeon Kim, Ph.D.**, Harvard Medical School and Mass. General Hospital

**Michelle Theus, Ph.D.**, Virginia Tech/Virginia-Maryland College of Vet. Medicine

**Call for Poster Abstracts:** Undergraduate, graduate, and postdoctoral neuroscientists at all Virginia Universities and Colleges are encouraged to present their latest research.

**Submit** (1 page): Title, Authors (student & mentor), Laboratory Affiliations, Research Abstract and Registration to [CVCSNsymposium2016@gmail.com](mailto:CVCSNsymposium2016@gmail.com)

A limited number of "data blitz" speaking opportunities (in lieu of a poster) are open to postdocs and senior graduate students. Indicate this preference at the top of your submission.

**More Information:** [CVCSNsymposium2016@gmail.com](mailto:CVCSNsymposium2016@gmail.com) and <http://www.cvcsn.vcu.edu/>



The 2016 Central Virginia Chapter of the Society for Neuroscience Symposium

# *Brains in a Dish*

Friday, March 25<sup>th</sup> 2016

9a – 6p at the  
Jordan Conference Center

University of Virginia

1340 Jefferson Park Ave, Charlottesville, VA 22903

\*\*\*Registration deadline is **Friday, March 4<sup>th</sup>, 2016**: the pre-symposium head-count is essential for planning & catering the event.\*\*\*

**Registration** (complete form electronically and email to [CVCSNsymposium2016@gmail.com](mailto:CVCSNsymposium2016@gmail.com))

Faculty /  Professional: \$100

Postdoc /  Resident /  Technician: \$30

Undergraduate /  Graduate /  Medical /  Other Student: \$10

(Registration fee also covers catering throughout the symposium as well as CVCSN membership for one year)

**Student lunch with plenary speaker:**  Yes  No

(First 20 students to sign up will enjoy an exclusive lunch together with one of the invited speaker)

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Name: \_\_\_\_\_ Title: \_\_\_\_\_

University/Dept: \_\_\_\_\_

E-mail: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Street Address/PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Mark Your Method of Payment** (regretfully, we cannot accept credit cards):

**Purchase Order:** Email a scanned copy of your PO (payable to CVCSN) **with** your completed Registration Form to ([CVCSNsymposium2016@gmail.com](mailto:CVCSNsymposium2016@gmail.com)). The CVCSN EIN is 23-7064518. The PO category is X02 in eVa.

**Personal Check:** Payable to CVCSN. Mail or hand-deliver checks:  
C/o Unsong Oh, MD  
P.O. Box 980599, Richmond, VA 23298

**Questions?** Contact Dr. Jessica Connelly, Secretary Officer of CVCSN, [CVCSNsymposium2016@gmail.com](mailto:CVCSNsymposium2016@gmail.com)