

International Workshop on Developmental Nephrology

***Abstract Submission Form***

*(Please Note: Tables are Permissible; Diagrams are NOT Permissible*

*2,500 Character Limit (Includes Spaces and Punctuation)*

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| **Contact/Presenting Author Information** | | | | | | | |
| First Name: | | Last Name: | | | | Degree (2 Max):  1.  2. | |
| Institution: | | | Department: | | | | |
| Address: | | | | | | | |
| City: | State/Province: | | | Zip/Postal Code: | | | Country: |
| Phone: | Fax: | | | | Email: | | |
| **Young Investigator Question**  Please check the box that applies to the Presenting Author. | | | | | | | |
| Yes, I am within 5 years of my first appointment to faculty. | | | | | | | |
| No, I am NOT within 5 years of my first appointment to faculty. | | | | | | | |
| **Additional Authors**  *\* Must List Name, Degree, Institution, and Email* | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| **Abstract** | | | | | | | |
| Title: | | | | | | | |
| Body: | | | | | | | |

Please submit to Juliet Rodrigo, IWDN Event Coordinator

Email: [julietaprilrodrigo@gmail.com](mailto:julietaprilrodrigo@gmail.com)