

## AASV STUDENT SEMINAR CO-AUTHOR CONFIRMATION FORM

(only one co-author confirmation form is needed per abstract)

## **STUDENT INFORMATION**

Student Name:	
Abstract Title:	
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Position:	
Affiliation:	
E-mail Address:	
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## **CO-AUTHOR CONFIRMATION**

Please certify by checking the following statements:

- I accept being listed as a co-author on this abstract.
- I attest to this student's character and interest in swine medicine.
- I am a veterinarian and/or veterinary school faculty member.
- I have worked with this student in (check all that apply):
  - Design of the project
  - Implementation of the project
  - Development of this abstract

## COMMENTS:

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Save this form as "*StudentLastName\_StudentFirstName\_*CoAuthorForm.pdf" (example: Smith\_Mary\_CoAuthorForm.pdf) E-mail the saved form to Dr. Alex Ramirez: <u>alex@aasv.org</u> (send from the e-mail address you listed above). **Due date: September 27, 2010**