

**Scientific Membership Application Form**

<b>Applicant Name:</b> <i>(Last, First)</i>			
<b>Academic Title:</b>			
<b>Degree:</b>			
<b>Department:</b>			
<b>School / Unit:</b>			
<b>Campus Address:</b>			
<b>Telephone Number:</b>			
<b>E-mail Address:</b>			
<b>Assistant's Name:</b> <i>(if applicable)</i>			
<b>Assistant's E-mail:</b>			
<b>Type of membership you are applying for:</b> <i>(check one)</i>			
Scientific Membership:	<input type="checkbox"/>	Associate Membership:	<input type="checkbox"/>
<b>Summary of research interests in children's health and disease:</b>			

<b>Area(s) of research alignment with CHINJ research programs:</b> <i>(Please check preferred program alignment. If more than one, please indicate which area is your primary interest)</i>	
	Inflammation, Immunity and Infection
	Autism and Neurodevelopment
	Pediatric Cancers, Development and Stem Cell Research
	Childhood Obesity and Metabolism
Submit your completed Scientific Membership application form along with a current CV to the following e-mail address: <b>kathleen.semler@rutgers.edu</b>	
<p><b>Child Health Institute of New Jersey</b>  Rutgers, The State University of New Jersey  89 French Street, Room 3210  New Brunswick, NJ 08901</p> <p><b>Tel: 732-235-9523</b>  Our website: <a href="http://rwjms.umdnj.edu/chinj/">http://rwjms.umdnj.edu/chinj/</a></p>	<p><b>Arnold B. Rabson, MD</b>  Director, Child Health Institute of New Jersey  Rutgers Robert Wood Johnson Medical School  <b>Email:</b> <a href="mailto:rabsonab@rwjms.rutgers.edu">rabsonab@rwjms.rutgers.edu</a></p> <p><b>Kathleen Semler</b>  Program Administrator  <b>Email:</b> <a href="mailto:kathleen.semler@rutgers.edu">kathleen.semler@rutgers.edu</a></p>