

# Tennessee Academy of Family Physicians

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## -A-B-S-T-R-A-C-T-

### 2022 STUDENT & RESIDENT RESEARCH PAPER COMPETITION APPLICATION

Paper Title (REQUIRED): \_\_\_\_\_

Description/Explanation of your Research:

YOUR NAME: \_\_\_\_\_

YOUR MAILING ADDRESS: \_\_\_\_\_

YOUR CITY/STATE/ZIP: \_\_\_\_\_

YOUR CELL NUMBER: ( \_\_\_\_\_ ) YOUR EMAIL: \_\_\_\_\_

YOUR AAFP/TNAFP Member Identification Number: \_\_\_\_\_

YOUR MEMBERSHIP CATEGORY: \_\_\_ Resident Member - Residency Program: \_\_\_\_\_

or \_\_\_ Student Member - Medical School: \_\_\_\_\_

**ACADEMIC FACULTY:** *If you wish to receive copies of notification sent to your student and/or resident please provide the following:*

Faculty Name: \_\_\_\_\_ Your Email: \_\_\_\_\_

Faculty Mailing Address/City/Zip: \_\_\_\_\_

**RETURN BY AUGUST 1, 2022 (firm deadline)**

by email: [tnafp@tnafp.org](mailto:tnafp@tnafp.org) (**preferred**); or, by fax: **(615) 370-5199**