

The University Seminars at Columbia University

**CURRICULUM VITAE  
for Nomination of Associate Member**

**CV MUST BE SUBMITTED WITH AN ACCOMPANYING LETTER OF NOMINATION**

DATE: \_\_\_\_\_

UNIVERSITY SEMINAR ON \_\_\_\_\_

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

HOME ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_  
(home) (office)

EXACT TITLE OF PRESENT POSITION, INCLUDING INSTITUTION:  
\_\_\_\_\_  
\_\_\_\_\_

<u>ACADEMIC DEGREES</u>	<u>INSTITUTION</u>	<u>YEAR</u>

SELECTED PUBLICATIONS (continue on reverse or include an attachment):  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU HAD A PREVIOUS APPOINTMENT AT COLUMBIA?       YES     NO

If "YES:"      DEPARTMENT                      TITLE                                      DATE

\_\_\_\_\_

TO OBTAIN A COLUMBIA UNIVERSITY ID CARD, WHICH ALLOWS ACCESS TO LIBRARIES AND THE FITNESS CENTER, PLEASE PROVIDE YOUR DATE OF BIRTH. OTHERWISE, FEEL FREE TO LEAVE THIS BLANK.

DATE OF BIRTH: \_\_\_\_\_

Please return this form to the seminar chair for submission with letter of nomination.

Please call 212-854-2389, or email [univ.seminars@columbia.edu](mailto:univ.seminars@columbia.edu), if you have any questions.