



UNC
 CENTER FOR FUNCTIONAL GI &
 MOTILITY DISORDERS

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We are glad that you are interested in visiting the Center as part of your continuing education. Please note that financial support is usually not available from The Center.

Please email this form - along with your CV to sjeremia@med.unc.edu

Alternatively, you can fax everything to the Center Administrator at 919.843-2793 or mail it to:

Center Coordinator
 UNC Functional Gastrointestinal Disorders Center
 CB# 7080, Bioinformatics Building
 Chapel Hill, NC 27599-7080
 USA

NAME: _____

TITLE: _____

OCCUPATION: _____

INSTITUTION: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

FAX: _____

EMAIL: _____

DO YOU CHECK YOUR EMAIL DAILY? YES NO



WHAT IS THE FOCUS OF YOUR RESEARCH AND/OR CLINICAL WORK?

WHICH OF THE CENTER'S ACTIVITIES ARE YOU PRIMARILY INTERESTED IN?
 PLEASE CHECK ALL THAT APPLY.

- | | |
|--|---|
| <input type="checkbox"/> CLINICAL (FUNCTIONAL GI) | <input type="checkbox"/> RESEARCH DATABASE MANAGEMENT |
| <input type="checkbox"/> PHYSIOLOGICAL TESTING | <input type="checkbox"/> PATIENT INTERVIEW SKILLS |
| <input type="checkbox"/> PSYCHOLOGICAL SERVICES | <input type="checkbox"/> RESEARCH |
| <input type="checkbox"/> ADMINISTRATION OVERVIEW OF THE CENTER | |
| <input type="checkbox"/> NUTRITION IN FUNCTIONAL GI DISORDERS | |
| <input type="checkbox"/> DRUG STUDY DESIGN | |

WHAT ARE THE APPROXIMATE DATES YOU WOULD LIKE TO VISIT?
 PLEASE USE DD/MO/YR

FROM _____/_____/_____

UNTIL _____/_____/_____

TOTAL LENGTH OF STAY: _____

HOW WILL YOU BE SENDING US YOUR CV?

- EMAIL FAX TO CENTER (919-843-2793)
- MAIL TO CENTER