

ABSTRACT SUBMISSION FORM

Title of Presentation

Author(s)

[First Name, Last Name]

Primary Presenter

Email

Program Area

[e.g., Physical Therapy, Audiology]

Date

Faculty Mentor Signature (required for students)

Check this box if the primary presenter is a student investigator who would like to be considered for a platform presentation (~15 minute oral presentation).

Include your abstract in the text box below with an objective/purpose statement, as well as methods, results, and discussion/conclusion sections (≤ 450 words). Completed forms should be emailed to the CHP Research Committee Chair by 5pm on Friday, February 20th 2025. Primary presenters (and faculty mentors if applicable) will be notified of abstract acceptance/decisions within 2-3 weeks of the submission deadline.

ABSTRACT