



EMORY
COLLEGE
OF ARTS AND
SCIENCES

Center for Mind, Brain, and Culture

FACULTY RESEARCH & READING GROUP APPLICATION

Please provide the following information for your intended interest group:

Semester:

[Click here to enter text.](#)

Meeting Dates:

[Click here to enter text.](#)

Meeting Time:

[Click here to enter text.](#)

Location :*

[Click here to enter text.](#)

** The CMBC will provide use of its internal conference room when available during normal business hours (8 am – 5 pm). If the group will meet elsewhere, please indicate:*

Faculty Organizer Name:

[Click here to enter text.](#)

Faculty Department:

[Click here to enter text.](#)

Cell phone contact number:

[Click here to enter text.](#)

Book Title(s)* & Author(s):

[Click here to enter text.](#)

** Or key article(s)/seminal reading(s)*

Please give a brief synopsis of why this topic is both **TIMELY** and **OF INTEREST** to Emory faculty across the College):* *Or key article(s)/seminal reading(s)*

[Click here to enter text.](#)

Preferred Catering / Caterer:

[Click here to enter text.](#)

Amount Requested for Catering Costs:

[Click here to enter text.](#)

CMBC APPROVAL:

- ☐ Approval granted
☐ Approval denied

TOTAL FUNDING APPROVED _____

Funding Period _____