

## ***Biographical Info for Meds 5T6 50<sup>th</sup> Reunion Website***

**Please:**

- 1. PRINT your entries**
- 2. Complete as soon as possible**
- 3. Send with RECENT HEAD PHOTO (any size) to address at bottom.**

Last name (in 1956)	
First name	
If married name is different, please enter:	
Address – City	
Address – Prov/State	
Address – Country	
Email address	
Phone No. (optional)	
Name of current spouse/partner	
Number of children	
Number of grandchildren	
Type of professional activity before retirement	
Location of professional activity (City, Province/State)	
List most valued professional honors	
Proudest accomplishments	
Retired now? (Y/N)	
Personal interests & activities, etc.	
Most cherished memory of medical school days	
Comments?	

**Return ASAP (no later than Mar 10) to:**

**Laurie Naiman**  
**441 Carolina Ln**  
**Palo Alto, CA 94306 USA**  
[lnaiman@comcast.net](mailto:lnaiman@comcast.net)