



**DOWNSTATE**  
HEALTH SCIENCES UNIVERSITY

University Hospital of Brooklyn  
College of Medicine  
School of Graduate Studies  
College of Nursing  
School of Health Professions  
School of Public Health

To: The Downstate Community

From: David Christini *David A Christini*  
Interim Dean, School of Graduate Studies

Annual Research Day Dinner on Wednesday, April 17, 2024 will be at Pacific Palace Restaurant, 813 55<sup>th</sup> Street, Brooklyn, (55<sup>th</sup> Street and 8<sup>th</sup> Avenue, Brooklyn) at 6:00pm. The menu is a traditional ten course Chinese banquet. Special diet (i.e., vegetarian) meals will be made available if you request one by Friday April 5<sup>th</sup>. We must receive a reservation for each attendee, regardless of whether they are being sponsored by the School of Graduate Studies. Please bring this dinner reservation to Sharon Reid-Spence in the Graduate Office, by Friday, April 5<sup>th</sup>. Parking is free with validation on 55<sup>th</sup> Street (garage located under the restaurant); the closest subway is the N at the 8<sup>th</sup> Avenue station. All information about Research Day, including the application and the schedule, is at <https://www.downstate.edu/education-training/school-of-graduate-studies/annual-research-day/index.html>

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**Reservation for Research Day Dinner at Pacific Palace  
6:00 p.m., Wednesday, April 17, 2024**

Name _____	Program/School _____			
<u>Subscription</u>		<u>Number</u>	<u>Cost</u>	<u>Total</u>
School of Graduate Studies Students		_____	Sponsored	<u>xxxxxx</u>
<i>Presenting Students from other schools,</i>				
<i>Presenting Residents/Post-Doctoral Fellows (partially sponsored)</i>		_____	\$30.00	_____
Faculty, Staff, Alumni, Guests, and friends ( <i>partially sponsored</i> )		_____	\$40.00	_____
		=====		=====
<b>Total</b>		# _____		\$ _____

First subscriber special Diet type, if any \_\_\_\_\_

Please bring this form and payment (if required) to Sharon Reid in the Graduate Office (BSB 3-114a, 3<sup>rd</sup> floor of the BSB, near the escalator) by Friday, April 7<sup>th</sup>. Payment in cash is preferred; please contact Ms. Reid for other payment options if cash payment is not possible.

Additional names on this voucher \_\_\_\_\_ Special Diet type \_\_\_\_\_,  
 \_\_\_\_\_ Special Diet type \_\_\_\_\_,  
 \_\_\_\_\_ Special Diet type \_\_\_\_\_.