



**AUGUSTA UNIVERSITY
MEDICAL COLLEGE
OF GEORGIA**

Dear Prospective Participant:

Thank you very much for your interest in the Anatomical Donation Services Program. The program is coordinated by the Department of Cellular Biology and Anatomy of the Medical College of Georgia, which is one of the nine colleges comprising Augusta University. The program provides for the education of students across our campus including those training to become physicians, physician assistants, dentists, occupational therapists, physical therapists, medical illustrators, and researchers. These students study the anatomical organization of the human body to acquire a solid foundation for their careers as health care professionals. They undertake their studies mindful of how fortunate they are to study the human body and imbue the highest ideals of respect for this opportunity.

Many individuals, from all walks of life and a wide variety of occupations, have made the decision to donate their bodies to our program. They recognize the enormous impact their donation will make in educating students. This selfless gift ensures that the next generation of health care professionals will understand the complexity of the human body in normal and diseased states preparing them to deliver excellent health care to the citizens of our community, our state and our nation.

We thank you for considering the Anatomical Donation Services Program as a way to make a lasting contribution to the education of the next generation of health care professionals.

Sincerely yours,

Sylvia B. Smith, PhD, FARVO
Regents' Professor and Chair
Department of Cellular Biology/Anatomy
Medical College of Georgia
Augusta University

**Augusta University
BODY DONATION
DONOR REGISTRATION FORM**

CONSENT FORM

I hereby state that it is my wish to donate my body to Augusta University, Medical College of Georgia immediately upon my death, for purposes of education and research in such manner deemed appropriate by the Augusta University Anatomical Donation Program.

I have read and agree to the program guidelines and policies explained in the Information for Donors document (Attachment). I understand that my donation may be refused if, at the sole discretion of the program's representative, the program is unable to accept it for any reason.

Signature

Date Signed

You must have TWO people sign as witnesses to your signature. The witnesses do not need to be Notarized but they must be at least 18 years old and present at the time you sign the consent form.

#1 Witness Signature

Date Signed

#2 Witness Signature

Date Signed

VITAL STATISTICS

PLEASE TYPE or PRINT

Legal Name: First		Middle	Last														
Street Address		Within City Limits?		County													
City/State		Zip Code	Telephone Number														
Social Security Number	Date of Birth		City and State of Birth (include country if not USA)														
Usual Occupation (type of work performed during your career)			Kind of Business or Industry														
Marital Status: (please circle)	Never Married	Married	Widowed	Divorced													
Spouse's Name	First	Middle	(Maiden if applicable)Last														
Have you ever been in the Armed Forces?	Yes	No															
Race: (please circle)	African American	Asian	White	American Indian	Other (specify)												
Hispanic Origin	Yes	No	U. S. Citizen	Yes	No												
Education: (highest grade completed)	1	2	3	4	5	6	7	8	9	10	11	12	College: 1	2	3	4	5+
Father's Name	First	Middle	Last														
Mother's Name	First	Middle	Last	Maiden Name													

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BRIEF MEDICAL HISTORY

PLEASE TYPE or PRINT

REQUEST FOR ASHES

I request that my ashes be **INTERRED** in the Augusta University Cinerarium at the annual Memorial Service.

OR

I request that my ashes be **RETURNED** to recipient below.

Signature of Donor: _____

Recipient's Full Name

Address

Relationship

Contact Information

If you have questions or need case specific information, please call us. Our normal working hours are Monday through Friday, 7:30 AM until 5:00 PM. The contact number is (706) 721-3731.

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Additional Information may be found on our website below

<http://www.augusta.edu/mcg/cba/bodydonation/>
