

Documentation of Relationship to Candidate

(Required for external letters of recommendation only)

Candidate's Name _____

Reviewer's Information

Name _____

Academic Rank/Title _____

Institution/Organization _____

Length of time you have known the candidate (# of years):

Check all that apply in each category:

1. Your relationship to the candidate and his/her work:

Collaborator (worked with or co-authored papers)

Present or past colleague, mentor or mentee, at same academic institution or hospital as a student, post-doctoral fellow, resident, or faculty member

Present or past colleague in professional activities (stud sections, advisory boards, professional society activities, etc.)

None of the above (please provide a description of your relationship):

2. Your knowledge of the candidate's work is based on (mark all that apply):

CV and personal statement

Publications

Presentations

Personal knowledge and discussions of his/her work

Participation with candidate in professional activities (study sections, advisory boards, professional society activities, etc.)

3. Comments (*optional*):

Signature: _____ Date: _____