

**External Referee Form**

Please return this form with your letter.

**TO:** Click or tap here to enter text.

**FROM:** Click or tap here to enter text.

**SUBJ:** Relationship to Candidate

**CANDIDATE:** Click or tap here to enter text.

**Relationship to the candidate and their work:**

|  |  |
| --- | --- |
| Past and/or present student, trainee, or colleague at the same institution at which you had a direct or significant role in their development. | [ ]  Yes [ ]  No |
| Family or close friendship. | [ ]  Yes [ ]  No |
| Co-authored scholarship work/grants in the last five years (with the exception of very large national clinical trials where multiple authors have a very distant relationship or in the case of serving on national research or service panels). | [ ]  Yes [ ]  No |

Other, please specify: Click or tap here to enter text.

**Knowledge of candidate’s work primarily based on:**

|  |  |
| --- | --- |
| Their publications and CV | [ ]  Yes [ ]  No |
| Scholarly presentations | [ ]  Yes [ ]  No |
| Personal knowledge and discussions | [ ]  Yes [ ]  No |
| Participated on review panels (study section, advisory boards, etc.) | [ ]  Yes [ ]  No |

**External Reviewer’s Signature Date**