Applicant Name:        
Fellowship Program:

The program director and fellowship selection committee have found the applicant suitable to enter the fellowship based upon a review of prior training and summative evaluations of training in the core specialty.

Please provide the following information for consideration of this applicant (first four components required):

1. Applicant’s CV
2. Proof the applicant has successfully completed the core residency training
3. Proof the applicant has satisfactorily completed Steps 1, 2 and, if eligible, 3 of USMLE
4. Statement from PD and selection committee demonstrating how the applicant has demonstrated clinical excellence and suitability to enter the program based on prior training and review of prior summative evaluations
5. For international graduates, verification of Educational Commission for Foreign Medical Graduates (ECFMG) certification is also required.

In addition to the above, evidence of at least one of the following four exceptional qualifications is required: (select one or more)

|  |  |  |
| --- | --- | --- |
| Check |  | Explain: |
|  | Participation in additional research training in the specialty | Click or tap here to enter text. |
|  | Demonstrated scholarship in the specialty | Click or tap here to enter text. |
|  | Demonstrated leadership during or after residency training | Click or tap here to enter text. |
|  | Completion of an ACGME-I-accredited program | Click or tap here to enter text. |

Please check the boxes below to acknowledge understanding of these additional responsibilities. Bullet points below with \* only apply to ACGME-accredited programs.

* Applicant was informed of the fact that their training may not lead to certification by ABMS member boards or AOA certifying boards.
* If the exception is granted, the applicant must complete a fellowship Milestones evaluation (for the purposes of establishment of baseline performance by the Clinical Competency Committee), within twelve weeks of matriculation. *This evaluation may be waived for an applicant who has completed an ACGME International-accredited residency based on the applicant’s Milestones evaluation conducted at the conclusion of the residency program.\**
* If the trainee does not meet the expected level of Milestones competency following entry into the fellowship program, the trainee must undergo a period of remediation, overseen by the Clinical Competency Committee.\*

|  |  |  |
| --- | --- | --- |
|  | Signature | Date |
| Program Director Signature |  |  |

**Return Completed forms to**:

Cuc Mai, MD

Sr. Associate Dean, Graduate Medical Education/DIO

17 Davis Blvd., Suite 315

Tampa, FL 33606

(*or via e-mail to this Box email address:* [Submitt.el37cwuc4o6n9uwv@u.box.com](mailto:Submitt.el37cwuc4o6n9uwv@u.box.com))

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**GME Documentation/Process**

Decision by GMEC

|  |  |
| --- | --- |
|  | Exception Granted |
|  | Exception Denied |

Approved by GMEC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Rev April 2021*