

LETTER OF RECOMMENDATION REFEREE FORM

This form must be returned with your letter

Referee Name:

Referee Title and Affiliation:

Name of Candidate:

Promotion and/or Tenure Request:

Within the UAMS College of Medicine's Promotion and Tenure system, 2 types of letters may be found in the P & T packet- Required Letters and Support Letters.

1. REQUIRED LETTERS of Recommendation are letters which review the candidate's work to determine if they meet the criteria established in our pathway for consideration for promotion. These letters must come from reviewers who have no conflict of interest or vested interest in the candidate's outcome.

2. SUPPORT LETTERS may come from individuals who personally know the candidate and comment specifically on their expertise in their field.

If the Letter author answers "Yes" to question 1,2, or 3 – their letter cannot count as a required letter for the candidate's packet, but may serve as a support letter.		
1. Has the candidate been a student, trainee, mentee, or employee with whom you had a direct or significant role in their professional development?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Is the candidate a family member, close friend, close colleague (i.e. in the same department/division), or former partner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. In the opinion of the letter writer, does a conflict of interest exist because of a previous collaboration?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If the Letter Author answer's "Yes" to Question 4 or 5 please provide additional information regarding the relationship and your ability to review the candidate without bias.		
4. Is the candidate a co-investigator on a funded research project now and/or within the past 3 years? (exceptions are given to very large multi-institutional research studies/projects where investigators have a very distant relationship)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Has the letter writer co-authored on a publication with the candidate in the last 3 years that represents a conflict of interest in the opinion of the letter writer? (exceptions are given to very large research studies/projects where co-authors have a very distant relationship)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered "Yes" to question 4 or 5. Please provide further details regarding your relationship to candidate and your ability to review this candidate without bias:		
Additional Comments:		

Knowledge of candidate's work based on:

Check all that apply:

1. Publications and CV	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Scholarly presentations	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Personal knowledge and discussions	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Participated on review panels (study section, advisory board, committee work etc)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

External Reviewer's signature and date