| **Continuing Education**  **Application Checklist** |
| --- |

|  |  |
| --- | --- |
| **Academic Fellowship • Medical Education Fellowship** | |
|  | Application Form |
|  | Curriculum Vitae |
|  | Letter of Intent  *Brief statement outlining your personal learning objectives to be pursued during the program and how you hope to apply new insights gained in your future practice* |
|  | **Three** Letters of Reference *One letter must be from a recent Program Director More weight will be given to letters written within the last 12 months* |
|  | English Language Proficiency Test Results *(if English is not your first language)* |
|  | Letter from your academic institution (Dean or Chair) confirming that you have or will receive Faculty Status, or that you are a recognized teacher in their program |
|  | Letter confirming release time for Program attendance and study *(if you are a current Trainee)* |
| **Clinical Teacher Certificate • Clinical Research Certificate** | |
|  | Application Form |
|  | Curriculum Vitae |
|  | Letter of Intent  *Brief statement outlining your personal learning objectives to be pursued during the program and how you hope to apply new insights gained in your future practice* |
|  | One Letter of Reference from your current Chief or supervisor *More weight will be given to letters written within the last 12 months* |
|  | Letter confirming release time for Program attendance and study *(if you are a current Trainee)* |
| **Interprofessional Applied Practical Teaching and Learning in the Health Professions (INTAPT) •  Single Course** | |
|  | Application Form |
|  | Curriculum Vitae |
|  | Letter of Intent  *Brief statement outlining your personal learning objectives to be pursued during the course and how you hope to apply new insights gained in your future practice* |
|  | |