

Physical Medicine and Rehabilitation Structured Reference Letter

CaRMS ID:

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Applicant: Last Name, First Name

Referee: Title Last name, First name, Designation

Field of Practice

Job title / Academic Position

Institution / Medical School Affiliation

Street Address

City, Province

Country

Email

The candidate named above is applying for a position in a Physical Medicine and Rehabilitation residency. Thank you for agreeing to act as a referee. Please complete this Structured Reference letter in lieu of a traditional narrative reference letter.

Confidentiality of Content

Please indicate if the applicant had an opportunity to review the content of this letter before submission to CaRMS:

- The applicant did not have the opportunity to review the content of this letter before submission to CaRMS .
- The applicant had the opportunity to review the content of this letter before submission to CaRMS.

Reference documents submitted through CaRMS (Canadian Resident Matching Service) are indeed confidential to the applicants who include them within their application to their program. Referees are required to indicate whether they have shared the completed reference with the applicant.

Conflict of Interest

"I declare that I have not, at any point during the time I have known this applicant, had a relationship with this applicant that could be construed as a conflict of interest. This may include but is not limited to being: related, a close friend, business associate or treating physician."

- I declare no conflict of interest
- I may have a conflict of interest

Briefly explain:

(200 Characters)

Context of Working Relationship

When did you work with this applicant?

Start: [mm-yyyy]

End: [mm-yyyy]

For ongoing engagement please enter current month and year

At what stage of training did you work with this applicant?

- Pre-clerkship
 Early clerkship
 Mid to late clerkship
 Post-clerkship

How well do you know the applicant?

- Very well
 Somewhat well
 Somewhat well
 Not very well

Do you feel you have had adequate exposure in a work environment to assess this applicant fairly?

- Yes
 No

Is your assessment of this applicant based on direct clinical observation?

- Yes

Practice Setting - Location

- Primarily urban or suburban
 Primarily rural or regional
 Combination of rural and urban

Practice Setting - Type

- Primarily clinic based
 Primarily hospital based
 Combination of clinic and hospital

- No

Please describe the work setting

(200 Characters)

Nature of contact with applicant: (Check all that apply)

- Extended direct clinical contact (> 20 hrs/week)
 Limited direct clinical contact (< 20 hrs/week)
 Direct research contact
 Know indirectly through others/evaluations
 Committee prepared letter of recommendation
 Other:

(200 Characters)

Assessment

To your knowledge, has there ever been any professionalism concerns which might indicate unsuitability for post-graduate training?

- Yes
- No

Please describe your observation (200 Characters)

Please select the statement which best applies to this applicant:

- Performing at exceptional level compared to other medical students at the same stage of training.
- Performing well above level of training of other medical students at the same stage of training.
- Performing above level expected of other medical students at the same stage of training.
- Performing at level expected of other medical students at the same stage of training.
- Performing below level expected of other medical students at the same stage of training.

Final Statement

- I would strongly recommend this applicant for a residency position in PM&R.
- I would recommend this applicant for a residency position in PM&R.
- I would hesitate to recommend this applicant for a residency position in PM&R.
- I would not recommend this applicant for a residency position in PM&R.

Additional Comments

1000 Characters