

PRIMARY CARE ADDICTION MEDICINE FELLOWSHIP

REFERENCE REQUEST FORM 2020-21 Academic Year

Obtaining strong Letters of Reference (LoRs) is an essential part of the clinical fellowship application. All LoR authors should know you and have first-hand knowledge of your work. Current residents and those who have completed their training within the past five years must list their Residency Program Director or Associate Program Director as one of their references. Please provide each reference with a copy of this Reference Request Form, your academic CV, and personal statement. It is your responsibility to follow-up with your reference and to confirm that LoRs reach the Program Coordinator in time to meet program deadlines.

APPLICANT

In accordance with the Family Education Rights and Privacy Act I have the right of access to this reference but may choose to w	•
☐ I waive my right to inspect the contents of the reference	e.
\square I do not waive my right to inspect the contents of the re	eference.
Applicant's Name:	Date:
REFERENCE	
Full Name:	Relationship:
Institution:	
Address:	
City, State, Zip:	
Email Address:	Phone:

Reference letters should comment on the applicant's:

- Clinical competence and independence
- Academic achievement and leadership potential
- Patient-centered communication and other communication skills
- Commitment to a primary care addiction medicine career working with urban, low-income, and stigmatized populations

Please address reference letters to the Program Director:

Paula J. Lum, MD MPH FASAM UCSF Division of HIV, ID and Global Medicine at San Francisco General Hospital 995 Potrero Avenue, San Francisco, CA 94110

Send letters or other inquiries to Alyssa Michaels, Fellowship Program

<u>Coordinator</u> Box 0874 University of California, San Francisco San Francisco, CA 94143-0874

Email address: alyssa.michaels@ucsf.edu