FAMILY MEDICINE-EMERGENCY MEDICINE (EM)
RESIDENCY PROGRAM
REFEREE ASSESSMENT OF APPLICANT

Thank you for serving as a reference. In choosing residents for this Program, the Selection Committee places a good deal of emphasis on the information provided by medical faculty who have observed the applicant in the clinical setting. We would therefore request your candid comments in completing this questionnaire. The program asks you to please complete this form **in addition** to a formal personalized letter of reference. Your early reply is appreciated, as the candidate's application will not be evaluated without your appraisal. Occasionally, follow up is required for clarification.

May we call you to discuss this application if needed? ☐ **Yes** ☐ **No**

NAME OF APPLICANT: _____

1. In what setting have you observed the applicant?

A. Clinical Observation (specify): _____

B. Academic Advising: _____

C. Socially: _____

D. Other (please specify) _____

2. How well do you know the applicant?

A. ☐ Very Well   B. ☐ Fairly Well   C. ☐ Slightly

How long have you known the applicant? _____

3. To your knowledge, has there ever been any disciplinary/legal action or psycho/social behaviour involving this applicant which might indicate unsuitability for Emergency Medicine?

☐ Yes   ☐ No   If yes, please include details in reference letter.

4. Please circle the statement which best applies to this applicant:

a) Performing **far below level expected** of an FM resident.

b) Performing **below level expected** of an FM resident (but should be considered for an R3 position).

c) Performing **at level expected** of an FM resident.

d) In the **upper 25%** of FM residents (excellent resident, well above expected performance).

e) In the **upper 5%** of FM residents (truly exceptional).

Please indicate with a check (√) for each factor below your opinion of this applicant's position on that factor relative to other Family Medicine residents you have known.

	Unable to judge	Unacceptable	Below Average	Average	Above Average	Excellent
1. Medical judgment: gathers and uses data efficiently and effectively; defines problems and is a rational problem-solver; orders investigations in a deliberate and planned manner; able to differentiate between the ideal and reality; recognizes own limitation and seeks help appropriately	☐	☐	☐	☐	☐	☐
2. Organizational skills: makes good use of time and resources	☐	☐	☐	☐	☐	☐
3. Interpersonal skills: rapport, co-operation, attitudes towards supervision, sense of humour, empathy, sensitivity to the needs of others	☐	☐	☐	☐	☐	☐
4. Insight: self-assesses accurately, recognizes limitations, plans learning, sourcefulness, originality, skillfull management of available resources, ability to function independently, self-confident, assuredness	☐	☐	☐	☐	☐	☐
5. Motivation: seeks out opportunities and assumes responsibility; shows spontaneous initiative, ready to work hard, and has a desire to achieve	☐	☐	☐	☐	☐	☐
6. Reliability: dependability, sense of responsibility, promptness, conscientiousness, integrity	☐	☐	☐	☐	☐	☐
7. Maturity: personal development, ability to cope with life situations	☐	☐	☐	☐	☐	☐

Please check one of the following:

☐ **I would not recommend this resident for EM residency**

☐ **I would recommend this resident with some reservation**

☐ **I would recommend this resident**

☐ **I would recommend this resident without reservation**

Name (Please print) _____

Title _____

Signature _____

Date _____

Phone _____

Thank you for including this form with your letter of reference for this candidate.