This form is to be completed by the Division Head or Hospital Head (if more appropriate)

Name and position of person completing this form:

NAME OF APPLICANT:

Please indicate how the candidate has met the criteria that are necessary for the Committee to consider appointment at, or promotion to, this level.

The criteria are:

1. Has demonstrated skills as an enthusiastic, effective and devoted leader in the educational program and has received formal teaching evaluations that indicate he/she is an excellent teacher who continually stimulates learners. (attach evaluations or certificates)

2. Is recognized by his/her peers as being an outstanding clinician who has made documented significant contributions to professional practice in his/her hospital, agency, or professional organization, and the University.

3. Has provided leadership in national or international professional organizations.

4. Has complied with specified departmental/school criteria for appointment.

5. Has demonstrated distinguished service and/or related leadership in committee, administrative or policy-making decisions in his/her hospital, agency, university or professional organization.

6. Provides more than 50 hours of academic contribution over a two-year period.

It is the responsibility of the applicant to have this form completed by the appropriate Division Head or Hospital Head and sent with the other application documents to Margaret Koshi by mail, email or fax:

UBC Department of Psychiatry
2C1 – 2255 Wesbrook Mall
Vancouver, BC V6T 2A1
Email: psychiatry.hrfaculty@ubc.ca
Fax: (604) 822-7756    Phone: 604-822-2142

Signature ____________________________ Date ____________________________