



THE UNIVERSITY OF BRITISH COLUMBIA

Department of Psychiatry  
Faculty of Medicine

UBC DEPARTMENT OF PSYCHIATRY  
For APPLICATION FOR INITIAL APPOINTMENT AS, OR PROMOTION TO

**CLINICAL PROFESSOR**

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 that he/she is an excellent teacher who continually stimulates learners.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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, the Faculty, or the University.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Participates in research as a primary investigator or in collaborative studies.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 Amity Chiang by email [amity.chiang@ubc.ca](mailto:amity.chiang@ubc.ca) or fax (604) 822-7756.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

