



# Fellowship Applicant Assessment Form

(To be completed by Referee)

**Name of applicant for CCPM Fellowship:**

**Number of years and capacity in which you have known the applicant:**

**Name and organization of Referee:**

**Size of comparison group:**

Candidates for Fellowship in the CCPM will normally be senior people in medical physics practice who have gained substantial knowledge, expertise, and recognition in the field. Please provide your assessment of the applicant in the following areas:

## 1. Professional attitudes and communication skills:

	Inappropriate for Fellowship	Very Good	Outstanding
Interpersonal skills			
Initiative			
Sense of responsibility			
Adaptability			
Oral and written skills			

## 2. Medical physics experience in the applicant's sub-specialty:

(The Credentials Committee expects Fellowship applicants to have significant experience most areas.)

	I am unable to assess this aspect	Unsuitable for Fellowship	Could carry out task with minimal supervision	Very competent: able to work independently
Interactions with physicians				
Supervision of other medical physicists or support staff				
Radiation dosimetry calculations				
Radiation protection advice and decisions				
Commissioning and calibration of new equipment				
Equipment purchase decisions or consultations				
Talking to staff, public or media about sensitive professional issues				
Designing a quality assurance program				

[Please continue on page two]

**3. An assessment of the candidate's clinical experience is particularly important. Please evaluate the candidate's application as follows:**

- I agree with the working experience, which is claimed in Sections 2.4, 3(A) AND 3(B):  
☐ Unable to assess      ☐ No      ☐ Uncertain      ☐ Yes
- I believe that the working experience claimed is relevant according to the criteria set forth in Section E.2 of the Regulations of the CCPM:  
☐ Unable to assess      ☐ No      ☐ Uncertain      ☐ Yes
- I recommend the applicant for Fellowship in the CCPM:  
☐ Unable to assess      ☐ No      ☐ Uncertain      ☐ Yes

In making the above assessment, the following guidance should be taken into account:

- Time spent in pursuit of a graduate degree is **not** considered to be relevant experience
- The experience should be comprehensive within the specialty
- Residency training taken at a recognized centre is considered relevant experience
- A research associate position would not generally provide comprehensive and hence relevant experience
- Where appropriate, patient related experience could include work with normal subjects

**4. General.**

In the space below or separately, please comment on the applicant's strengths and/or weaknesses as an expert medical physicist and his/her suitability for College Fellowship. Please review the application and make any necessary comments to either question or strengthen the information provided. An assessment of the candidate's clinical experience is particularly important. (If you choose, you may provide this information in a signed letter addressed to the Registrar of the CCPM on your organization's letterhead.)

**Date:**

**Referee's signature:**

Send via email to: [info@ccpm.ca](mailto:info@ccpm.ca)