**INSERT CANDIDATE NAME HERE**

**Candidate’s List of References for New Faculty Appointment**

**Feinberg School of Medicine**

Thank you for your interest in a faculty position at Northwestern University Feinberg School of Medicine (FSM). Please use this form to suggest the names of individuals who could write a letter of reference on your behalf.

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| --- | --- | --- | --- |
| **Guidance for Suggesting Referees** | | | |
| * If applying for a position at the rank of **Assistant Professor**, please provide **4-6 names**. * If applying for a position at the rank of **Associate Professor or full Professor**, please provide **6-8 names**. * Referees should hold an academic rank that is equivalent to or higher than the rank you are applying for at Northwestern University Feinberg School of Medicine * Referees should be from outside Northwestern University * Select referees who represent diverse institutions, and provide no more than two referees from the same institution. Geographic range of referees demonstrates breadth of reputation, which is especially important if you are applying for the rank of Associate Professor or full Professor. * If applying for the rank of Associate Professor or full Professor, referees without a training connection to you are preferred. | | | |
|  | | | |
| **Candidate’s Suggested Referees and Contact Information** | | | | | |
| 1 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 2 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 3 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 4 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 5 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 6 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 7 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |
| 8 | | Referee Name: | Degree: | Rank or Title: | |
| Email address: | | Institution: | |
| Referee’s relationship to candidate: | | | |