



VIRMP Acct. No. \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**Cummings School of Veterinary Medicine at Tufts University  
 Confidential Applicant Evaluation Form  
 Residency in Neurology**

\*It is not necessary to write a letter of recommendation in addition to this form unless you wish to do so.

Name of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail address: \_\_\_\_\_

Your Signature: \_\_\_\_\_

**For each of the following items, circle the appropriate number on the following evaluation scale as it applies to the applicant.**

**5 – Excellent   4 – Good   3 – Satisfactory   2 – Marginal   1 – Unsatisfactory   N/A – cannot evaluate**

**I. CLINICAL KNOWLEDGE AND EXPERTISE**

▪ Medicine knowledge	5	4	3	2	1	N/A
▪ Diagnostic skills/application of knowledge to clinical cases	5	4	3	2	1	N/A
▪ Technical skills (e.g. endoscopy, echocardiography)	5	4	3	2	1	N/A
▪ Medical record keeping	5	4	3	2	1	N/A
▪ Patient care	5	4	3	2	1	N/A

Comments:

**II. PROFESSIONALISM AND ATTITUDE**

▪ Maturity/judgment	5	4	3	2	1	N/A
▪ Cooperation and communication with peers	5	4	3	2	1	N/A
▪ Communications with owners	5	4	3	2	1	N/A
▪ Communications with referring veterinarians	5	4	3	2	1	N/A
▪ Interactions with students	5	4	3	2	1	N/A
▪ Interactions with staff	5	4	3	2	1	N/A
▪ Initiative and enthusiasm	5	4	3	2	1	N/A
▪ Responsibility and dependability	5	4	3	2	1	N/A
▪ Ability to handle stress	5	4	3	2	1	N/A

Over →

VIRMP Acct. No. \_\_\_\_\_  
Email Address: \_\_\_\_\_

Comments:

III. ACADEMIC DEVELOPMENT AND POTENTIAL

▪ Attendance at seminars/rounds	5	4	3	2	1	N/A
▪ Reading of the literature	5	4	3	2	1	N/A
▪ Potential to develop research project	5	4	3	2	1	N/A

Comments:

**Summary of evaluation:** Please mark the category denoting your overall recommendation of this applicant as compared with other resident applicants you have known.

- \_\_\_ A. Exceptional, top 5%
- \_\_\_ B. Excellent, top 10%
- \_\_\_ C. Good, top 20%
- \_\_\_ D. Average, top 50%
- \_\_\_ E. Not recommended
- \_\_\_ F. Insufficient knowledge of applicant on which to make recommendation

**Thank you for taking the time to complete this evaluation. Please feel free to provide any additional information helpful or essential to a fair appraisal.**