Letter of Reference Form

Please print this form and follow the directions below.

**PART 1 – To be completed by the Applicant**

Last Name (surname)___________________________ First Name (given)_____________ Middle Name__________

I hereby waive any right to examine this letter of reference. I realize that the University will utilize this reference only in conjunction with consideration of my application to the Fellowship in Bioethics program. I realize that a waiver of my right of access to this reference is not a condition of my application.

I agree to the above waiver: YES____ NO____

Signature of Applicant____________________________________________________________

E-mail ______________________________ Date____________________

**PART 2 - To be completed by the Referee**

We appreciate your cooperation in providing a candid evaluation of the above named applicant’s preparation for and ability to succeed in this program. If the applicant has agreed to the above waiver, HMS will hold this form and accompanying letter as confidential.

Please complete this form, scan it, and email it along with your scanned reference letter (on official letterhead) to the email bioethics_postdoc@hms.harvard.edu.

When writing the letter of reference for this applicant, please address the following:
- In what capacity do you know the applicant?
- Describe how the applicant has demonstrated an interest in bioethics.

Please ensure that your letter of reference includes:
- The applicant’s full name
- Your full name, title or position, and contact information

Referee Name _________________________________________________________________

Position ________________________________ Institution Telephone # ______________________

Referee E-mail ______________________________ Date____________________