



Reference Letter Request

Name: _____ Class of: _____

Email: _____ Phone: _____

DEADLINE

Please note that requests and deadlines are subject to the Dean's/Associate Dean's availability. Any requests made within three weeks of the deadline cannot be guaranteed.

Date the letter(s) need to be ready:

Application/Program Deadline _____

Application/Program Deadline _____

Application/Program Deadline _____

Application/Program Deadline _____

☐ I will pick up the letter(s) / form(s); or ☐ Please mail the letters directly to the institution(s)

_____ I have written the US Board Exam - Part 1 – date written _____

_____ I have written the US Board Exam - Part 2 – date written _____

ATTACHMENTS

To assist the Dean/Associate Dean in providing your reference letter(s) / signed forms / documentation as quickly as possible, please ensure that you attach the following documents to this request (as applicable):

1. A current curriculum vitae.
2. A brief statement indicating why you feel you should be accepted into a particular specialty or residency program and any other strengths or experiences that you may have had through UBC that are not apparent from your curriculum vitae or transcript.



3. A list of all the addresses that reference letter(s) should be directed to (providing an electronic file would be helpful!).
4. All forms, including details on what must be completed/signed by the Dean's office.

The UBC Dentistry Student Services office will provide module grades in order to provide greater detail to the Official UBC Transcript. UBC transcripts can be ordered from the UBC Student Services Centre (<http://www.students.ubc.ca/current/transcripts.cfm>).

When you have all your documentation ready, please submit them along with this form to the Student Services Office in JBM 278.

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For office use only.

Date submitted: _____

Received by: _____

Letters mailed/submitted: _____