

Medical Physics Residency Program Applicant Checklist

☐ Proof of English Language proficiency (if applicable)

Please complete <u>all sections</u> of this fillable form and submit with your application directly to the Program to Tanya Webb <u>tanya.webb@utoronto.ca</u>. This Checklist is required to process your application. Please submit this document along with your application package by the January 7, 2022 deadline.

First Name:				Last Name:	
MedPhys Match Number:					
1.	EDUCATIO	N			
Ρl	ease complete	the fol	lowing table to summarize the degrees or c	ertificate programs that are in p	rogress or completed.
	Degree or Certificate		Institution	Year of Completion/ Expected Completion Date	CAMPEP Program (Y/N)
2. LEGAL STATUS IN CANADA Canadian Citizen Permanent Resident Other 3. PROFESSIONAL REFERENCES (indicate if letter requested)					
Reference #1					
Reference #2					
Reference #3					
4.	RESIDENC	Y SITE	ES		
The Medical Physics Residency Program is seeking applicants at four participating sites. Kindly indicate below which site(s) you would like to be considered for. Please select all that apply.					
18071 - Durham Regional Cancer Centre, Lakeridge Health 18072 - Carlo Fidani Regional Cancer Centre, Trillium Health Partners (Credit Valley) 18070 - Odette Cancer Centre, Sunnybrook Health Sciences Centre 18011 - Princess Margaret Cancer Centre, University Health Network 5. SUBMIT DOCUMENTS — DEADLINE: JANUARY 7, 2022					
To be considered for admission, applicants must submit the following documents by the January 7, 2022 deadline:					
 Medical Physics Residency Program Applicant Checklist (completed in its entirety) Covering letter that describes the candidate's background and motivation for applying to the Program Detailed, current CV Unofficial university transcripts from undergraduate and graduate schools (with the understanding that the Program may request the official transcripts at any time) 					