

Medical Physics Residency Program Applicant Checklist

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 May 2, 2025 deadline.

First Name:				Last Name:	
1.	EDUCATIO	ON			
Ple	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) *If you are a PhD Candidate, kindly request that your supervisor indicate your expected date of completion in their reference letter 					
Reference #1					
Reference #2					
Reference #3					
Th sit	e(s) you would	sics Res	idency Program is seeking applicants for on be considered for. Please select all that ap Margaret Cancer Centre, University Head MENTS – DEADLINE: May 2, 2025	alth Network	te. Kindly indicate below which
To be considered for admission, applicants must submit, by the May 2, 2025 deadline, the following documents:					
	☐ Cov☐ Det☐ Und	vering lated, official Progra	hysics Residency Program Applicant Ch etter that describes the candidate's ba current CV university transcripts from undergradu am may request the official transcripts nglish Language proficiency (if applicab	ckground and motivation for late and graduate schools (w at any time)	applying to the Program