 **FORM CRED-865**

**Letters of Reference**

The Application Package considered by the Credentials Committee is to include a minimum of two Letters of Reference. **Please share this information with the individuals who have agreed to write the letters on your behalf.**

1. **Who can write the letter?**
2. A letter of reference from the Resident’s AVDC Supervisor is **required**, and is to be separate from the Supervisor’s Report (item N).
3. The second letter is to be from a dental diplomate with whom the Resident has spent considerable time, or if the Resident has had little or no interaction with another AVDC or EVDC diplomate, the second letter is to be from a veterinarian or dentist who has worked with the Resident and can comment on the clinical abilities and knowledge of the Resident. If the writer of the second letter cannot or elects not to comment on the specific items below, the Resident will be asked to arrange for a different but suitably-qualified individual to write and submit the second letter. *Do not ask individuals who have little or no direct knowledge of your dental expertise to write letters of reference.*
4. **Content.** The letters are to:

* State how long the writer has known the Resident and in what capacity.
* Describe any personal strengths and weaknesses of the Resident, including comments on the Resident’s character and professional integrity.
* In particular, describe the Resident’s knowledge and abilities to diagnose and treat veterinary dental conditions based on the writer’s own observations.
* State whether the writer considers the Resident qualified for entry to AVDC.

1. **Waiver of Access: All letters of reference must to be accompanied by a signed “*Waiver of Access*” form.** This form is available on the next page of this file and can be down-loaded from the Credentials Application section of the *Information for Registered Residents* web page. Send or give a copy of the form to each of the people who have agreed to write letters of reference for you.
2. **Submission**: The letters are to be marked “Confidential” and are to be sent by the writer of the letter to the Executive Secretary of the College at the address below. They must be received on or before the July 15th application deadline. Submission of a scanned signed copy as an email attachment in an e-mail sent from the letter writer’s own email address or by fax of the original letter. Mail signed letters of reference to: AVDC Executive Secretary, 103 E Calderwood Dr, Ste 110, Meridian, ID 83642, USA or fax them to: 1-208-895-7872, or send as an attachment to an e-mail to [ExecSec@AVDC.org.](mailto:ExecSec@AVDC.org)
3. **Previous Application:** When a resident has submitted an unsuccessful application in a prior year, either new letters of reference are required or copies of reference letters supporting a previous application may be submitted if accompanied by a note from the writer of the letter stating that s/he approves inclusion of the original letter in the current year’s application package.

**Waiver of Access to Confidential Letters of Reference**

**TO THE APPLICANT**: The American Veterinary Dental College requires a minimum of two letters of recommendation as part of its application process. If you prefer that any of the letters of recommendation being requested are to be considered confidential, you may waive your rights to inspect and review the letter(s). Such waivers are voluntary and are not required as a condition of admission to the College.

For each waiver of access that you elect to make, you must complete, and sign a separate *Waiver of Access to Confidential Letter of Recommendation*. Forward this form (whether or not access has been waived) to the reference with your request for his or her letter of recommendation. Letters of recommendation will not be considered unless accompanied by this form. Please send a copy of this form to each individual from whom you are requesting a recommendation letter.

In the spaces provided, please print both the name of your reference and your own name: Name of reference:

Your name:

**TO THE PERSON PROVIDING THE REFERENCE**: The above-mentioned individual is applying for admission to the American Veterinary Dental College. If the *Waiver of Access to the Confidential Letter of Recommendation* has been completed and signed by the candidate, the confidentiality of your letter of recommendation can be maintained. If the Waiver has not been signed, the applicant will have the right of access to your letter. Please sign on the line provided indicating that you have read and understand this paragraph, and submit it together with your letter of recommendation irrespective of whether the candidate has signed or not.

Reference’s signature: Date:

**WAIVER OF ACCESS TO CONFIDENTIAL LETTER OF RECOMMENDATION**

I understand that the letter of recommendation from concerning

me is to be received and maintained in confidence by the American Veterinary Dental College. The principal purpose for requesting this letter of recommendation is to facilitate the processing of my application for admission to the College. With respect to this letter of recommendation, I hereby voluntarily and expressly waive any and all rights that I may have under all applicable laws, regulations, and policies. I understand that the rights I am waiving include, but are not limited to, the right to inspect and review this letter, the right to have a copy of this letter made for my use, and the right to request an amendment to this letter.

Applicant’s signature: Date: