

**Applicant Instructions:**

Please DO NOT mark this task complete or submit your application until you have received confirmation that your recommender has completed this task. You will be required to log back into the site to complete your submission when you have received both of your recommendations. An email notification will be sent when your Recommender has submitted their recommendation.

## **Letter of Recommendation – Medical Form**

### **Part 1 – Physician/Diabetes Educator’s Information**

Name:

What is your role in the diabetes team?

Name of Diabetes Education Centre:

Street Address:

City:

Province:

Postal Code:

Telephone Number:

Email Address:

### **Part 2 – Applicant’s Name/Medical Background**

Number of years the patient has been managed by the clinic:

Is the patient 1<sup>st</sup> generation diabetic?  Yes  No

How would you rate this patient’s self-care and management relative to your other patients of similar circumstances?

- Excellent (top 5%)
- Very Good (top 10%)
- Good (top 20%)
- Average
- Below Average

**Evidence of Regular Diabetes Health Care Follow-ups**

Provide readings for the last 24 months unless applicant has been diagnosed within the previous 24 months. If this is the case, enter the diagnosis date:

Please provide applicant’s HbA1c Readings from the last 24 months (please include all available readings from 2020 and 2021, if there are no readings available, please explain in the next section):

	Date	Reading
Present Year – Reading 1		
Present Year – Reading 2		
Present Year – Reading 3		
Previous Year – Reading 1		
Previous Year – Reading 2		
Previous Year – Reading 3		

If you cannot provide HbA1c Readings from the last two years due to COVID-19 related disruptions to the patient’s diabetes care, please explain below

If you have additional background information about this applicant that the committee should consider in the scholarship review process, please let us know (e.g. recent death in the family, concurrent medical conditions, or financial struggles in the family etc.)

Date: YYYY/MM/DD