

**UC SAN DIEGO-ACADEMIC PERSONNEL SERVICES  
IDENTIFICATION AND QUALIFICATIONS OF EXTERNAL REFEREES**

<b>Candidate Name:</b>		
<b>Department(s):</b>		
<b>School(s):</b>		
<b>Proposed Action(s):</b>		
<b>Proposed Effective Date:</b>		

<b>Total Letters Received:</b>	
<b>Total Independent Letters Received:</b>	

List all individuals solicited for a letter, whether or not they responded

<b>A.</b>	Referee Name:					
	Referee Title:					
	Institution:					
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Qualifications:					

<b>B.</b>	Referee Name:					
	Referee Title:					
	Institution:					
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Qualifications:					

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<b>C.</b>	Referee Name:					
	Referee Title:					
	Institution:					
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Qualifications:					

<b>D.</b>	Referee Name:					
	Referee Title:					
	Institution:					
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Qualifications:					

<b>E.</b>	Referee Name:					
	Referee Title:					
	Institution:					
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Qualifications:					

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<b>F.</b>	Referee Name:				
	Referee Title:				
	Institution:				
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept. <input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Qualifications:				

<b>G.</b>	Referee Name:				
	Referee Title:				
	Institution:				
	Independent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Selected by:	<input type="checkbox"/> Dept. <input type="checkbox"/> Candidate
	Responded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Provided Letter?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Qualifications:				