
Applicant Interview Acknowledgment

Applicant's Full Name (print):

Program with which you are interviewing:

Date of Interview:

Please read the statements below and acknowledge that you understand by saving this form to your computer. Then complete the form and acknowledge that you will adhere to them by signing at the bottom of the page, saving the file with your name, and emailing back to the program with which you are interviewing.

I have been informed about and understand the institutional policy regarding eligibility and recruitment procedures for applicants for residency positions at the University of Tennessee Health Science Center College of Medicine-Chattanooga as well as the Resident Annual Letter of Agreement (*i.e.*, contract) that I would be required to sign if I matched with or were otherwise appointed to a resident/fellow position at this institution.

- Our GME Institutional Policies for the Chattanooga Campus:
<https://uthsc.edu/comc/gme/institutional-policies.php>
- Our current GME Annual Letter of Agreement (sample Resident/Fellow Contract):
<https://www.uthsc.edu/comc/gme/documents/resident-annual-agreement-120.pdf>.
- Our GME Policy on Recruitment, Selection, and Appointment policy is:
<https://www.uthsc.edu/comc/gme/documents/recruitment-appointment.pdf>

Note that program specific eligibility requirements included on each program's web page.

This year, in keeping with the Association of American Medical Colleges (AAMC) and Coalition for Physician Accountability recommendations, many of our programs are still offering virtual interviews only. Some programs have decided to return to in-person interviews or a combination of virtual and in-person interviews, depending on recommendations of their specialty's Program Director Association or Societies. Our institution and programs desire to maintain a fair, equitable, and confidential interview process throughout the recruitment season. Therefore, we guarantee the following:

The UTHSC College of Medicine-Chattanooga and our programs will neither record nor distribute any part of any interview whether conducted on a virtual platform (*e.g.*, Zoom) or in-person. This includes screenshots, still photos, audio recording, and video recording and applies regardless of whether the state in which our institution is located requires only one-party consent.

Likewise, we ask that you, the applicant, agree to the same, in order to preserve the integrity of the interview process. Please enter your name in the space below and sign confirm your understanding:

I, _____ (the applicant), will neither record nor distribute any part of any interview--whether conducted on a virtual platform (*e.g.*, Zoom) or in-person. This includes screenshots, still photos, audio recording, and video recording and applies regardless of whether the state in which I am located at the time of the interview requires only one-party consent. I have also viewed the GME links provided above.

Signature of Applicant

Date Signed