



**Sponsoring Department Agreement  
IMG Alternate Pathway for Diagnostic Radiology Certification**

*Form to be completed by the chair of the ACGME-accredited Sponsoring Department*

Complete requirements can be found on the ABR website: <https://www.theabr.org/diagnostic-radiology/initial-certification/alternate-pathways/international-medical-graduates>

**Name of International Medical Graduate Candidate for ABR Certification:**

\_\_\_\_\_

Last	First	Middle
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Institution: \_\_\_\_\_ ACGME/RRC Program Number: \_\_\_\_\_

Name of Sponsoring Department Chair: \_\_\_\_\_  
Please print

Sponsoring Department’s responsibilities: *(Please initial to acknowledge.)*

\_\_\_\_\_ Inform candidate and provide opportunity to attend conferences in all areas related to diagnostic radiology to facilitate preparation for ABR exams.

\_\_\_\_\_ Complete and submit the IMG Alternate Pathway training verification forms when requested by the ABR.

\_\_\_\_\_ Provide opportunity for applicant to develop all six core competencies and attest to their attainment on the competency completion attestation form in diagnostic radiology prior to invitation to the Certifying Exam.

Requirement: Four years at the same Sponsoring Department, which has a diagnostic radiology program accredited by the ACGME or RCPSC (Canada). Training must be completed within eight years from the training start date.

Please indicate the Sponsoring Department’s plan for this candidate’s four years (amended plans may be filed later.)

Proposed Plan:

- A maximum of 12 months in research may be approved by the ABR to meet the requirements of the Alternate Pathway program. Please submit the details for ABR review.
- Up to three years of diagnostic radiology residency may be counted. However, four years of diagnostic radiology residency does not qualify for the ABR Alternate Pathway, as that is the standard training pathway.
- Intended to be a prospective four-year training plan. Candidates may only use up to two years of retrospective training.

<b>4-YEAR PLAN</b>	<b>START DATE (MM/DD/YY)</b>	<b>END DATE (MM/DD/YY)</b>	<b>POSITION</b>	<b>SUBSPECIALTY</b>	<b>ACADEMIC RANK (if applicable)</b>
First Year					
Second Year					
Third Year					
Fourth Year					

\_\_\_\_\_  
Sponsoring Department Chair Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
IMG Alternate Pathway Candidate

\_\_\_\_\_  
Date