(Office use only)	ABR S.D. ID:	
	IMG ID:	10-2018
Date Received:		10-2018



Sponsoring Department Agreement IMG Alternate Pathway for Radiation Oncology Certification

	Last		First	Middle			
To be co	ompleted by the	Chair of the Departr	ment of the ACGI	ME-accredited radiation oncology program.			
Institution:			ACGME/RRC Program Number:				
Name o	f Sponsoring De	partment Chiar:					
	Please print						
1. Spons	soring Departme	ent's responsibilities:	: (Please initial to	acknowledge.)			
		A. Inform candidate and provide opportunity to attend conferences in all areas related to radiation oncology in order to facilitate preparation for ABR exams.					
	B. Complete and submit the Annual IMG Alternate Pathway Verification forms each year the applicant is in the alternate pathway process.						
	C. Provide opportunity for applicant to develop all six core competencies and attest to their attainment prior to invitation to the oral examination on the competency completion attestation form in radiation oncology.						
	D. Alert candid	date to key dates for	application for q	ualifying and certifying exams.			
2. Prop	erly documente	d clinical year trainin	ng requirements h	have been accepted by Sponsoring Department.			
	□ Yes	□No					

program accre	dited by the ACG	ME or RCPSC (C	anada.) (See A	•	nas a radiation oncology ts at https://theabr.org/ -graduates.)			
Please indicate th later.)	ne sponsoring dep	oartment's plan	for this candid	ate's four years (am	ended plans may be filed			
Proposed Plan:								
4-YEAR PLAN	START DATE (MM/DD/YY)	END DATE (MM/DD/YY)	*POSITION	SUBSPECIALTY	ACADEMIC RANK (If applicable)			
First Year								
Second Year								
Third Year								
Fourth Year								
,	e filled as <u>faculty</u>							
Sponsoring Deparment Chair Signature					Date			
MG Alternate Pathway Candidate					Date			