



Letters of Recommendation

Three letters of recommendation (LOR) are to be submitted from Psychiatry Faculty who have direct knowledge of your work. The letters must be addressed to Ole Thienhaus, MD, Department Chair and Noshene Ranjbar, MD, Training Director, Integrative Psychiatry Fellowship. The letter should indicate a recommendation for a proposed title of Clinical Instructor, outline your teaching abilities and academic potential. Please have LORs submitted separately from the faculty directly to ~~PIA~~ by emailX

Application Fee

This application must be submitted with a \$200 non-refundable application fee. Make check payable to: University of Arizona Department of Psychiatry and earmark for IPF (Integrative Psychiatry Fellowship).

The check should be mailed to:

Attn: ~~PIA~~
2800 E. Ajo WayUPD
Tucson, AZ 85713

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Submit to: ~~io/PIA~~ io/PIA@psychiatry.arizona.edu cc: noshene@psychiatry.arizona.edu