**MUST BE ON FACULTY/DEPARTMENT LETTERHEAD AND INCLUDE CONTACT INFORMATION**

**ADDRESS, PHONE NUMBER AND EMAIL ADDRESS**

Click Here to Enter a Date

Insert Employee’s Complete Name (as it appears on his/her passport) and Address

Date of Birth insert date of birth,

**LETTER OF REFERENCE/CONFIRMATION OF EMPLOYMENT FOR PERMANENT RESIDENCE FOR (INSERT NAME):**

**DATE OF BIRTH:**

**CLINICAL FELLOW, NOC 3111**

Insert name is employed as a Clinical Fellow in the Faculty of INSERT NAME, Department of INSERT DEPARTMENT  .

Employment start date: enter start date and end date (if applicable)

Salary and Benefits: enter salary and benefits (if applicable)

The position is (INSERT full time, 40 hours per week) and they continue to be employed in this position.

The following job duties for this position include:

* Diagnose and treat patients;
* Prescribe medication;
* Specialist in clinical medicine

|  |  |  |
| --- | --- | --- |
|  |  | Signature  |
| Insert name and job title  |  |  |
|  |  |  |