\*Date\*

Re: \*Resident Name\*

To Whom It May Concern:

Dr. \*\*\* has applied to the GW Clinical Public Health Track. I confirm that they are a resident in good standing and I support their engagement in this program. The program will enhance their training and will not hinder their ability to meet program requirements. I agree to support them in attending at least 70% of the planned curriculum in order to successfully complete the track.

Regards,

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