

Application form instructions

Please follow these instructions carefully and fill in all of the required information completely. Completed forms, including the applicant's curriculum vitae, must be received by May 10, 2019. Completed application forms and all supporting documentation will be reviewed by the ASTRO Fellows Selection Committee. The Class of 2019 Fellows will be announced in July and will be honored at a special convocation ceremony at the 2019 ASTRO Annual Meeting.

ASTRO Fellowship is based on merit, length of continuous ASTRO membership, substantial service to ASTRO and significant contributions to the field of radiation oncology. Fellowship is limited to Active, International and Emeritus members of the Society. Generally, a minimum of 15 years of membership is required.

Applicants for ASTRO Fellow will be evaluated in four primary pathways – research, patient care, education and leadership/service in the field. While contributions in each of these areas will be evaluated, the selection committee will look for at least one pathway that is truly outstanding.

Applications must be accompanied by one letter of nomination from an ASTRO Fellow and three letters of support from a designated group of ASTRO Active members which includes current or past members of the ASTRO Board of Directors, ASTRO Gold Medalists, ASTRO Fellows and current or former department chairs. Emeritus members, except Gold Medalists, are not eligible to nominate. Self-nominations will not be accepted and nominations without all required supporting documentation will be rejected. Applicants are responsible for ensuring that all documentation arrives by the deadline.

Submit To:

ASTRO Fellows Selection Committee

Attn: Anna Arnone
251 18th Street South, 8th Floor
Arlington, VA 22202
Phone: 703-839-7326
Fax: 703-839-7327
Email: fellows@astro.org

Candidate Information

Full Name: _____

ASTRO Membership Status:

- | | |
|--|---------------------------|
| <input type="checkbox"/> Active Member* | ASTRO Join Date: _____ |
| <input type="checkbox"/> International Member* | ASTRO Join Date: _____ |
| <input type="checkbox"/> Emeritus Member* | Date of Retirement: _____ |

**Generally, a minimum of 15 continuous years of ASTRO membership is required to be eligible for nomination, however, candidates with less than 15 years of membership, who have contributed substantial service to ASTRO may be considered by the ASTRO Fellows Selection Committee.*

Practice Setting:

- Private Academic Retired

Contact Information

WORK ADDRESS

Institution/Company/Field _____

Address _____

City/State/Zip _____

Country _____

Phone _____

Email _____

HOME ADDRESS

Address _____

City/State/Zip _____

Country _____

Phone _____

Email _____

ASTRO Service and Participation

DATES		ASTRO BOARD, COMMITTEES, TASK FORCE SERVICE, ETC.	POSITION HELD
1			
2			
3			
4			
5			
6			
7			

Certification Information

Please list degrees, fellowships, certifications, etc., including undergraduate and graduate study.

DATES		DEGREE, FELLOWSHIP, ETC.	AREA	INSTITUTION
1				
2				
3				
4				
5				
6				
7				

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

Radiation Oncology Residency Completed: *mm/yyyy* _____

Radiation Oncology Certification

Certification by: _____ Certification in: _____ Date of Certification: *mm/yyyy* _____

Current Medical Licensure

State: _____ License No.: _____ Date of Certification: _____

State: _____ License No.: _____ Date of Certification: _____

Pathway Selection

Please choose one primary and one secondary pathway for the consideration of your nomination. Note that you may provide information for all pathways. Descriptions of each of the four pathways are included in the Candidate Accomplishment section that follows.

	PRIMARY	SECONDARY
Research	<input type="checkbox"/>	<input type="checkbox"/>
Patient Care	<input type="checkbox"/>	<input type="checkbox"/>
Education	<input type="checkbox"/>	<input type="checkbox"/>
Service and Leadership	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Accomplishments

RESEARCH

Include significant research as evidenced by grants, authorship of scientific papers or books that have been a guiding influence in the immediate or future aspects of the practice of radiation oncology.

- a. Attach a list of your contributions to medical literature. Information must be submitted in standard bibliographic form.
Please DO NOT submit copies of published materials.
- b. Please list other notable research achievements, grants and awards.

DATES		NAME OF RESEARCH GRANT, AWARD OR OTHER SIGNIFICANT ACHIEVEMENTS
1		
2		
3		
4		
5		
6		

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

PATIENT CARE

Please indicate significant contributions to patient care and clinical excellence as evidenced by improvement in the standard of practice in the management of disease.

DATES		SIGNIFICANT CONTRIBUTIONS TO IMPROVED PATIENT CARE
1		
2		
3		
4		
5		
6		

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

EDUCATION

Please list your significant contributions to the advancement of education in the field of radiation oncology as evidenced by active participation in residency training, faculty service, extensive presentations to advance the field at regional and national meetings, or providing significant mentorship to those joining the field.

a. List information relevant to education.

DATES		INSTITUTION AND ACADEMIC APPOINTMENTS	NO. OF STUDENTS	TYPE OF STUDENTS	HOURS PER YEAR
1					
2					
3					

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

b. List teaching honors received, such as "Teacher of the Year" and similar awards or honors.

DATES		INSTITUTION NAME	SUBJECT TAUGHT	AWARD NAME
1				
2				
3				

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

Service and Leadership

Demonstration of leadership and service in the specialty of radiation oncology that has advanced the field and the Society. This may include, but is not limited to, evidence of extensive volunteerism, advancement of scope of practice, patient advocacy, and legislative and regulatory issues. Service to ASTRO is requisite and primary to this fellow designation, (see page 1) however, service to medicine overall, including other societies will also be considered.

- a. Non-ASTRO significant contributions to radiation oncology. Include membership in other radiation oncology related societies, service on non-ASTRO committees, councils, commissions and other services to organized radiation oncology.

DATES		OTHER SOCIETY, COMMISSION, COUNCIL, ETC., NAMES	NO. OF MEMBERS	POSITION HELD
1				
2				
3				
4				

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

- b. Service to the broader medical community other than radiation oncology. Please include governmental and health service appointments; local, county, state and national medical societies; major hospital staff appointments (i.e., department chair, chief of staff, medical board, etc.) and any other pertinent data.

DATES		MEDICAL SOCIETY OR ORGANIZATION	NO. OF MEMBERS	OFFICE HELD
1				
2				
3				
4				

Attach any additional sheets for documentation as necessary.

Check here if further information is attached.

Endorsements

All ASTRO Fellow applicants require a nomination letter from an ASTRO Fellow and letters of support from ASTRO Active members in good standing that are either current or past members of the ASTRO Board of Directors, ASTRO Gold Medalists, ASTRO Fellows, or current or former department chairs. Emeritus members, except Gold Medalists, are not eligible to submit nomination or support letters. Please list supporters and indicate the letters of recommendation that are included with this application. Only one of the four nominator/supporters may be in practice with the applicant.

All letters of nomination and support must outline the nominee's contributions to the field and clearly establish the scope and significance of the nominee's accomplishments. Each letter should be limited to two pages or 1,000 words.

Nomination Letter from _____ Letter Attached

Nominating member is in business practice with this ASTRO Fellow applicant.

Nominating member is not in business practice with this ASTRO Fellow applicant.

Nomination Letter from _____ Letter Attached

Nominating member is in business practice with this ASTRO Fellow applicant.

Nominating member is not in business practice with this ASTRO Fellow applicant.

Nomination Letter from _____ Letter Attached

Nominating member is in business practice with this ASTRO Fellow applicant.

Nominating member is not in business practice with this ASTRO Fellow applicant.

Nomination Letter from _____ Letter Attached

Nominating member is in business practice with this ASTRO Fellow applicant.

Nominating member is not in business practice with this ASTRO Fellow applicant.

Applicants are strongly encouraged to submit their application and all supporting material in one packet by mail or electronically. Letters of nominations and support may be mailed separately to ASTRO. All letters must indicate the candidates name at the top of the letter. Applicants are responsible for ensuring all supporting material arrives by the deadline. ASTRO will not be responsible for following up to secure letters of support.

Reset Form

Print Form

Submit by Email