



**NOMINATION FOR DISTINGUISHED FELLOWSHIP**

Membership Department MS #5, 1808  
1000 Wilson Boulevard, Suite 1825  
Arlington, VA 22209-3901  
Telephone: 1-888-35-PSYCH  
apa@psych.org

DISTRICT BRANCH: \_\_\_\_\_  
DATE: \_\_\_\_\_  
APA MEMBERSHIP SINCE: \_\_\_\_\_

**INSTRUCTIONS:** All information must be typewritten. Do not type on back of pages. **If additional space is needed, attach addendum.** Curriculum vitae not acceptable.

NAME: \_\_\_\_\_  
First Middle Last

ADDRESS: \_\_\_\_\_  
Street City State Zip

TELEPHONE: ( ) \_\_\_\_\_ Birthplace: \_\_\_\_\_ Birthdate: \_\_\_\_\_

**EDUCATIONAL INSTITUTION: DATE: DEGREE:**

UNDERGRADUATE

MEDICAL SCHOOL(S)

INTERNSHIP

PSYCHIATRIC RESIDENCY

SUBSPECIALTY (CHILD, LEGAL, SOCIAL, COMMUNITY, ETC.)

ADDITIONAL (INCLUDING PSYCHOANALYTIC)

CERTIFICATE/DEGREE

Please list **3 Distinguished Fellows** whom you have requested to write to the District Branch supporting your nomination. Additional letters from non-Distinguished Fellows and/or non-psychiatrists are encouraged as well. All persons should be familiar with your current and past professional standing and contributions and should elaborate on items 1 through 9 on page 2 of this form.

NAME:

ADDRESS:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Spaces below must be used; attach addendum if necessary.

NAME: _____ CURRICULUM VITAE NOT ACCEPTABLE BOARD CERTIFICATION(S):  <b>ABPN:</b> General (date) _____ Child (date) _____ Equivalent _____ (date) _____ Other _____ (date) _____	FOR APA COMMITTEE USE ONLY
2. ACTIVITIES IN DISTRICT BRANCH(ES) OR OTHER COMPONENTS OF THE APA (include dates):	
3. ACTIVITIES IN OTHER MEDICAL AND PROFESSIONAL ORGANIZATIONS (include dates):	
4. PARTICIPATION IN NON-COMPENSATED MENTAL HEALTH AND MEDICAL ACTIVITIES OF SOCIAL SIGNIFICANCE (include dates):	
5. PARTICIPATION IN COMMUNITY ACTIVITIES UNRELATED TO INCOME-PRODUCING ACTIVITIES (include dates):	
6. CLINICAL CONTRIBUTIONS (include dates):	
7. ADMINISTRATIVE CONTRIBUTIONS (include dates):	
8. TEACHING CONTRIBUTIONS (include dates):	
9. SCIENTIFIC AND SCHOLARLY PUBLICATIONS (Append list of titles of articles or books, publishers & dates):	
Revised 01/05 MRB	Approved _____ Deferred _____