

**UC SAN DIEGO-ACADEMIC PERSONNEL SERVICES  
IDENTIFICATION AND QUALIFICATIONS OF EXTERNAL REFEREES**

<b>Name</b>		<b>Dept.</b>	
<b>Proposed Action</b>			

List all individuals solicited for a letter, whether or not they responded

<b>A.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>B.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>C.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

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<b>D.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>E.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>F.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>G.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

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<b>H.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>I.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>J.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							

<b>K.</b>	Referee Name:		Selected by:	Dept.	<input type="checkbox"/>	Cand.	<input type="checkbox"/>
	Title:		Responded?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Institution:		Provided Letter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Qualifications:							