



# FAES

FELLOW OF THE  
AMERICAN EPILEPSY  
SOCIETY

## FAES Letter of Reference Form

AES has created this form to make it easier for members to provide and request letters of reference. Two letters are required for the FAES application, but use of this form is optional.

### APPLICANT

FIRST NAME:

LAST NAME:

### REFERRER

FIRST NAME:

LAST NAME:

EMAIL ADDRESS:

PHONE:

HOW DO YOU KNOW THE APPLICANT?

PLEASE DESCRIBE HOW THE APPLICANT EXCELS IN AT LEAST ONE OF THE FOLLOWING AREAS:

- AES LEADERSHIP
- ACADEMIC ACHIEVEMENT
- RESEARCH EXCELLENCE
- TEACHING
- CLINICAL ACHIEVEMENT
- COMMUNITY SERVICE

DO YOU ENDORSE THE APPLICANT FOR THE FAES CREDENTIAL?

- YES
- NO

ADDITIONAL COMMENTS:

SIGNATURE:

DATE: