



2020 Early Career Forum Program Director Signature Page

Name of Fellow (***First, Last***) _____

- ☐ Yes, I have enclosed a one-paragraph recommendation as to why this trainee would benefit from attending Early Career Forum at ENDO 2020.
- ☐ I certify that the individual named above is actively enrolled in our endocrine training program and that the information provided online is accurate and valid.

Program Director Signature: _____ Date: _____

Program Director Name (Print): _____