

REAPPOINTMENT AGREEMENT
FOR RESIDENT/FELLOW PHYSICIAN HOUSE STAFF OF
UPMC MEDICAL EDUCATION (UPMCME)

The Program Director and faculty of your Residency Program have determined that you have performed in the current appointment year at a satisfactory or above level with respect to the progress requirements for your Residency Program. You are therefore appointed for a new appointment term not to exceed one year in your Residency Program at the PGY _ level. Please refer to the UPMCME website to review your financial support and benefits from UPMCME for this new appointment term consistent with your PGY status. The terms, conditions, obligations and expectations concerning your appointment remain the same as those identified in the original contractual agreement with UPMCME that you signed previously and in addition you must comply at all times with all UPMCME policies as updated and posted on the UPMCME website from time to time. If you have any questions please contact your Program Director or the UPMCME Office of Graduate Medical Education.

Please indicate your acceptance of this new appointment term by signing and dating below as indicated. Thank you for your continuing efforts to progress and succeed in your Residency Program.

PHYSICIAN

Date

Date

Date

UPMCME

Program Director

Hospital Administrative
Representative