



Date

RE: ACCEPTANCE LETTER

Dear Doctor,

On behalf of the Kern Medical Center Residency (Program), we are pleased to offer you a position as a PGY-1 Resident in the Program from _____ through _____.

Acceptance into this Program is contingent upon your meeting all Kern Medical Center, Kern County Hospital Authority, ECFMG (if applicable), and Medical Board of California or Osteopathic Medical Board of California, as the case may be, postgraduate training license requirements. These requirements include but are not limited to, a preemployment physical, mandatory drug and alcohol screening tests, completion of a background screening questionnaire, which includes national wants and warrants, Office of Inspector General (OIG) exclusions, social media search, social security name match, and sex offender registry, and signing for release of records and code of conduct. This offer will be withdrawn if you are unable to comply with all of these requirements prior to the start of your training.

As a reminder, Kern Medical Center has a zero-tolerance policy for substance abuse. Failure to pass the mandatory preemployment drug and alcohol screening tests will result in your immediate disqualification from participation in the Program.

Please confirm your acceptance of this offer by signing the following signature page and returning the scanned document to the Program Residency Coordinator.

Program Director

Director of Medical Education
Designated Institutional Official

I hereby accept a position as a PGY-1 in the Residency Program at Kern Medical Center in Bakersfield, California.

The training dates at this PGY-1 level will be _____ through _____. I understand this offer is contingent upon my completing all Kern Medical Center pre-employment and the state of California Medical Board postgraduate training and licensing requirements.

Resident/Fellow Signature

Date

SAMPLE