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## Notification of Resident Resignation, Termination, Delayed Start Date, or Leave of Absence

CPME requires that programs inform the Council within 30 calendar days of the following:

- Resident resignation, termination, or transfer
- Delay in resident start date
- Resident extended leave of absence
- Resident extension of training

Please submit this form by email to your program liaison or to [CPMESTaff@cpme.org](mailto:CPMESTaff@cpme.org) as formal notification of changes related to individual residents within 30 days of notification of resident action:

1. Sponsoring Institution Information	
Sponsoring institution	
Address 1	
Address 2	
City/State/Zip	
Program Director	

2. Resident Information, Resignation or Termination	
Name of Resident	
Training Year	
Action Taken	<input type="checkbox"/> Resignation <input type="checkbox"/> Termination
Effective Date	

3. Resident Information, Leave of Absence	
Name of Resident	
Training Year	
Dates of LOA	
Anticipated date of return	
Anticipated date of completion	
OTHER	

4. Resident Information, Delayed Start Date	
Name of Resident	
Training Year	
Expected Start Date	
Expected Completion Date	
Reason for delay	

By signing this form, the chief administrative officer(s) and the program director confirm the commitment of the institution(s) in providing podiatric residency training.

\_\_\_\_\_  
Chief administrative officer (or DIO)      Date

\_\_\_\_\_  
CAO of co-sponsoring institution      Date  
(if applicable)

\_\_\_\_\_  
Chief administrative officer (or DIO) printed name

\_\_\_\_\_  
CAO of co-sponsoring institution printed name  
(if applicable)

\_\_\_\_\_  
Program director      Date

\_\_\_\_\_  
Program director printed name