Date

E. Benjamin Clyburn, M.D.

ACGME-Designated Institutional Official

Associate Dean for GME

169 Ashley Avenue, Room 202, MSC 333

Charleston, SC 29425

Re: Approval to Release <<Resident Name>> from GME Contract

Dear Dr. Clyburn,

I am requesting that Dr. <<Resident Name>> be released from his <<Academic Year>> residency contract with the Graduate Medical Education Office. Dr. <<Resident>> was participating in <<Program>>. He/she has resigned from the residency program effective <<Date>> in order to <<Purpose of Resigning>>.

Please contact me if you need any additional information.

Sincerely,

Program Director

Department