



Name: _____
Address: _____

Email: _____

Fellowship Application

Section I Worksheet: Personal Qualifications (Minimum 12 points needed to qualify, maximum 25 points allowed in this section.)

A. Certification. [Ex: RT,R,CV]. Attach copy of each certificate or wallet card. 3.0 points ea. + _____

B. Education. Limited to last earned degree. Attach copy of earned degree.

Degree	School or Hospital	Year Earned	
1. Associate degree or hospital certificate	_____	2.0 points	+ _____
2. Baccalaureate	_____	4.0 points	+ _____
3. Masters	_____	6.0 points	+ _____
4. Doctorate	_____	10.0 points	+ _____

C. Experience in Cardiovascular/Interventional Technology. Attach letter from supervisor(s) or director(s) verifying each position and years worked.

Position	Hospital or College	Year(s)	
1. Staff technologist in CIT	_____	0.75 point/yr	+ _____
	_____		+ _____
	_____		+ _____
	_____		+ _____
2. Clinical instructor in CIT program	_____	1.0 point/year	+ _____
	_____		+ _____
	_____		+ _____
	_____		+ _____
3. Supervisor/Director in CIT Section	_____	1.5 points/year	+ _____
	_____		+ _____
	_____		+ _____
	_____		+ _____
4. Chief technologist/ Lead technologist	_____	1.0 point/year	+ _____
	_____		+ _____
	_____		+ _____
	_____		+ _____
5. Research coordinator Technologist in CIT research	_____	1.0 point/year	+ _____
	_____		+ _____
	_____		+ _____
	_____		+ _____

Please label all Section I documentation and attach to Section I worksheet.

Section I Total: _____

(Min 12, Max 25)

Section II Worksheet: Contributions to AVIR/National Level (Minimum 8 points to qualify, maximum 18 points allowed in this section.)

A. AVIR Active Membership (additive) (5 points required this section. AVIR office will verify membership. *A membership year is Jan1 - Dec 31. You must be a member in good standing since January 1, 2008 to be eligible to apply for Fellows status.*)

- 1. five years continuous membership (**required**) Years: _____ through _____ 1.0 point/year + _____
- 2. each additional year continuous membership Years: _____ through _____ 0.5 point/year + _____

B. Volunteer Leadership (Minimum 3 points to qualify.) **Attach appointment letter(s) or request verification from national office.**

	Board Position/Committee	Year(s)	
1.	AVIR National Officer or Board Member.	_____	2.0 points/year + _____
		_____	+ _____
		_____	+ _____
		_____	+ _____
2.	AVIR National Committee Chair.	_____	1.5 points/year + _____
		_____	+ _____
		_____	+ _____
		_____	+ _____
3.	AVIR National Committee Co-Chair or Coordinator.	_____	1.0 point/year + _____
		_____	+ _____
		_____	+ _____
		_____	+ _____
4.	AVIR National Committee Member or Ad Hoc Committee member	_____	0.5 point/year + _____
		_____	+ _____
		_____	+ _____
		_____	+ _____
5.	AVIR Liaison to External Society or Association (excludes Office of President)	_____	1.0 point/year + _____
		_____	+ _____
		_____	+ _____
		_____	+ _____

C. Presented lecture at AVIR annual scientific meeting. Lecture length must be a minimum of 50 minutes. If you have presented same lecture several times, you may only use this reference twice on this application. Please attach a copy of the program verifying your presentation.

Lecture Title	City/State Presented	Mo/Year	
_____	_____	_____	3.0 pts/lecture + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

D. Presented scientific paper at AVIR annual scientific meeting. Attach a copy of program verifying your participation.

Paper Title	City/State Presented	Mo/Year	
_____	_____	_____	1.0 point/title + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

E. Author/co-author or article in AVIR newsletter. Must be an original article appearing. Please attach copy of article.

Title of Article	Issue	Year	
_____	_____	_____	1.0 point/article + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

F. Attendance at AVIR annual scientific meetings. Attach copy of certificates of attendance.

Meeting Location	City/State Presented	Year	
_____	_____	_____	0.5 point/year + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

Please label all Section II documentation and attach to Section II worksheet. Section II Total: _____
(Min 8, Max 18)

Section III Worksheet: Contributions to AVIR/Local Chapter (Minimum 4 points to qualify, maximum 18 points allowed in this section.) Submit documentation from chapter to verify all points- documentation must be signed by current chapter president, vice-president, or director. The AVIR office cannot substantiate chapter participation.

A. Membership

1. Chapter membership: Years: _____ through _____ 0.25 point/year + _____

B. Volunteer Leadership

Board Position/Committee **Year(s)**

1. AVIR Local Chapter _____ 1.5 points/year + _____
 Officer or Board _____ + _____
 Member. _____ + _____
 _____ + _____

2. AVIR Local Chapter _____ 1.5 points/prog + _____
 Program Director _____ + _____
 (Local/regional meeting _____ + _____
 offering min 7 CEUs). _____ + _____
 Submit copy of meeting brochure.

3. AVIR Local Chapter _____ 1.0 point/year + _____
 Committee Chair.* _____ + _____
 _____ + _____
 _____ + _____

4. AVIR Local Chapter _____ 0.75 point/year + _____
 Committee Co-chair _____ + _____
 or Coordinator.* _____ + _____
 _____ + _____

5. AVIR Local Chapter _____ 0.75 point/year + _____
 Committee Member.* _____ + _____
 _____ + _____
 _____ + _____

6. AVIR Local Chapter _____ 0.50 point/prog + _____
 Program Director _____ + _____
 (Local/regional meeting _____ + _____
 offering min 1 CEU) _____ + _____
 Submit copy of meeting brochure.

* You may NOT claim points in Sections 3B3, 3B4 and 3B5 above if you held Officer/Board and committee positions simultaneously on the local chapter level. It is considered part of the duty of chapter leadership to participate in committee structure.

C. Presented lecture at AVIR chapter or regional meeting. Lecture length must be a minimum of 50 minutes. If you have presented same lecture several times, you may only use this reference twice on this application. Please attach a copy of the program verifying your presentation.

Lecture Title	City/State Presented	Mo/Year	3.0 points/lecture	+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____

D. Presented scientific paper at AVIR chapter or regional meeting. Attach a copy of program verifying your participation.

Paper Title	City/State Presented	Mo/Year	1.0 point/title	+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____

E. Attendance at AVIR chapter or regional meetings which offered a minimum of 7 CEUs. Attach copy of certificates of attendance.

Meeting	City/State Presented	Mo/Year	1.0 point/prog	+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____

F. Attendance at AVIR chapter or regional meetings which offered a minimum of 1 CEU. Attach copy of certificates of attendance.

Meeting	City/State Presented	Mo/Year	.25 point/prog	+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____
_____	_____	_____		+ _____

Please label all Section III documentation and attach to Section III worksheet. **Section III Total:** _____
 (Min 4, Max 18)

Section IV Worksheet: Contributions to Profession (Minimum of 12 points to qualify, maximum of 25 points allowed in this section.)

A. Educational Lectures and/or Presentations NOT presented at AVIR or AVIR Chapters. Presentation or lecture to allied health/medical professionals at a national, state/regional, or local meeting. Lecture length a minimum of 50 minutes. If you have presented this lecture several times, you may only record it for credit twice on this application. Please attach a copy of the program verifying your presentation.

- Lecture not less than 50 minutes presented at a **national** allied health/medical professional meeting other than AVIR or AVIR-chapters.

Lecture Title	City/State Presented	Mo/Year	
_____	_____	_____	3.0 points/title + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

- Lecture not less than 50 minutes presented at a **state or regional** allied health/medical professional meeting other than AVIR or AVIR-chapters.

Lecture Title	City/State Presented	Mo/Year	
_____	_____	_____	2.0 points/title + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

- Lecture not less than 50 minutes presented at a **local** allied health/medical professional meeting other than AVIR or AVIR-chapters.

Lecture Title	City/State Presented	Mo/Year	
_____	_____	_____	1.0 point/title + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

B. Presented scientific paper, abstract or exhibit at an allied health/medical professional meeting other than AVIR or AVIR chapters.

Lecture Title	City/State Presented	Mo/Year	
_____	_____	_____	0.5 point/title + _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____
_____	_____	_____	+ _____

C. Non-AVIR Publications. Attach copy of article and reference below.

	Publication	Issue	Year	
1.	Paper in national radiology journal (AJR, Radiology, JVIR, etc.)	_____	_____	2.0 points/article + _____
		_____	_____	+ _____
		_____	_____	+ _____
		_____	_____	+ _____

2. Article in radiology _____ 1.5 points/article + _____
 trade magazine _____ + _____
 (RT Image, ASRT, _____ + _____
 Advance) _____ + _____

3. Textbook. For each new title, submit copy of book title page, copyright page and first page of chapter/section with author=s name shown. (Excludes new editions.)

a. author Number of books: _____ 5.0 points ea + _____
 b. co-author Number of books: _____ 4.0 points ea + _____
 c. contributor: wrote chapter(s) Number of chapters: _____ 3.0 points ea + _____
 d. editor Number of books: _____ 2.0 points ea + _____

4. Computer software program or video program. Submit copy of program cover with author=s name.
 Number of programs: _____ 2.0 points ea + _____

D. Non-AVIR CIT Program/Meeting (Each program must be approved for a minimum of 7 CEUs.) Submit copy of meeting brochure.

1. Program Director

Program Title	City/State Presented	Mo/Year	
_____			1.5 pts/program + _____
_____			+ _____
_____			+ _____
_____			+ _____

2. Program committee

Program Title	City/State Presented	Mo/Year	
_____			1.0 pt/program + _____
_____			+ _____
_____			+ _____
_____			+ _____

E. Attendance at cardiovascular/interventional meeting(s) not organized by AVIR or AVIR Chapter. Attach copy of certificate of attendance.

Meeting Title	City/State Presented	Mo/Year	
_____			0.25 point/mtg + _____
_____			+ _____
_____			+ _____
_____			+ _____

Please label all Section IV documentation and attach to Section IV worksheet. **Section IV Total:** _____

(Min 12, Max 25)

Section V Worksheet. Submitting Your Application.

Complete Sections 1 through 5.

Label all documentation with the correct section/item reference. Attach appropriate documentation to each section worksheet.

A non-refundable application fee of \$75.00 must accompany your application.

Attach your check for the \$75.00 application fee and all supporting documentation to this application. Send your completed application to the attention of the AVIR Fellows Committee at: AVIR, 333 South State Street, Suite V324 • Lake Oswego, OR 97034.

A. Candidate Information:

Name: _____

Home Address: _____

City/State/Zip: _____

Home Phone: _____ Home Fax: _____

E-mail: _____

Work Place: _____

Department: _____

Address: _____

City/State/Zip: _____

Work Phone: _____ Work Fax: _____

Supervisor Name/Title: _____

B. Application Point Requirement. To meet the criteria for Fellows application consideration, the combined total of Sections I, II, III and IV must be a minimum of 36 points.

Section I _____ (Min 12 pts, max 25 pts)

Section II _____ (Min 8 pts, max 18 pts)

Section III _____ (Min 4 pts, max 18 pts)

Section IV _____ (Min 12 pts, max 25 pts)

TOTAL POINTS _____ (Min 36 points required to submit application.)

Explanation of Fellows Application Requirements and Documentation: All points filled in on this fellows application must have written verification or documentation in order to be reviewed.

SECTION I. PERSONAL QUALIFICATIONS. You must earn at least 12 points in this category in order to qualify. Any points over 25 are counted as 25.

I.A. **Certification.** You must have at least one national certification or registry. You receive three (3) points for each certification. Certification is limited to ARRT-R and ARRT-CV. Six (6) points maximum. Submit a copy of your current ARRT card.

I.B. **Education.** Limited to last degree earned. Only earned degrees completed by submission date are eligible. Please submit a copy of diploma or last transcript.

I.C. **Experience.** Experience ~~must be~~ in cardiovascular/interventional radiology only. Letter from current and/or past supervisor(s) must be forwarded to verify experience for each job held.

SECTION II. CONTRIBUTIONS TO AVIR/National Level. You must earn at least 8 points in this section. Any points over 18 will be counted as 18.

II.A. **Membership.** You must have a minimum of 5 years of continuous membership. Membership years are counted July 1 - June 30. To meet the continuous eligibility requirement of this application, you need to be a member in good standing since July 1, 1998 or longer. The Executive Office will verify length of AVIR membership.

II.B. **Volunteer leadership.** Each year served as an officer or board member, committee member/chair, or liaison on the national level must be documented. Submit letter(s) of election or appointment.

II.C. **Presented lecture at an AVIR function.** Submit a copy of the program showing your name and lecture title.

II.D. **Presented scientific paper.** Submit a copy of the program showing your name and paper title.

II.E. **Contributing author-AVIR newsletter.** Include a copy of the article, date of publication and publication title.

II.F. **Annual meeting attendance.** Submit a copy of the CEU record of attendance.

Section III. Contributions to AVIR/Local Chapter Level. You must earn at least 4 points in this section. Any points over 18 will be counted as 18.

III.A. **Membership.** Submit letter from chapter representative verifying chapter membership.

III.B. **Volunteer leadership.** Submit letter from chapter representative to verify service in local chapter: officer or board member; program director of local or regional meeting offering CEUs; committee chair/co-chair; committee member.

Program directors must submit copy of meeting brochure of local or regional meeting offering a minimum of seven (7) CEUs for Section III.B.2. or one (1) CEU for Section III.B.6.

You may **not** claim points for program director or committee work if you simultaneously held a position of local chapter leadership (i.e., officer or board member).

III.C. **Presented lecture at an AVIR function.** Submit a copy of the program showing your name and lecture title.

III.D. **Presented scientific paper.** Submit a copy of the program showing your name and paper title.

III.E/F. **Annual meeting attendance.** Submit a copy of the CEU record of attendance.

SECTION IV. CONTRIBUTION TO PROFESSION. You must earn a minimum of 12 points in this section. Points over 25 will be counted as 25. Contributions may be no more than 10 years past to show current involvement.

IV.A. **Lecture/seminar/workshop given or presented.** You may not use the same lecture/presentation title more than twice. Please include lecture title, name of group or organization, and year of presentation and a copy of the program that lists your lecture.

IV.B. **Presented scientific paper, abstract or exhibit.** A title used above as a lecture may be used once more in this or another section if it meets the presentation criteria. A title may not be used more than once in this section.

IV.C.1. **Publications: journal.** Please submit a copy of article and title page of journal.

IV.C.2. **Publications: trade journal, newsletter.** Please submit a copy of the article and title page of trade journal.

IV.C.3. **Publications: textbook.** Please submit a copy of book title page; copyright page; first page of chapter/section with author's name shown.

IV.C.4. **Publications: computer software program.** Please submit a copy of title page/license agreement/promotional material (showing author's name) of current edition.

IV.D. **Non-AVIR CIT program or meeting.** If you have been a program director of an interventional radiology meeting that offers a minimum of 7 CEUs, submit a copy of the program. If you are part of a program committee for an interventional radiology meeting that offers a minimum of 7 CEUs, submit a report by the program director or a copy of the program that lists the program committee members.

IV.E. **Non-AVIR meeting attendance.** Attendance at a cardio-vascular/interventional meeting not organized by AVIR or AVIR local chapters.

AVIR FELLOWS APPLICATION



Dear Fellows Candidate:

Congratulations! By requesting this application for Fellows status you have demonstrated your continued pursuit of excellence in our profession. Please complete the application, and return it with all supporting documentation and the \$75.00 application fee.

Thank you for your involvement and perseverance to date. We look forward to the prospect of welcoming you as an AVIR Fellow!

Fellows Committee

Helpful Hints for preparing your Fellows application:

- If you have any questions or need clarification on any part of the application please call Fellows Committee Chair or the AVIR office at (971) 364-0364.
- You must identify each piece of supporting documentation with the proper section and item number in the top right corner so that the committee can easily reference items and approve points on your application. *(Section/item labels have been provided for your convenience - using them is not mandatory.)* Applications that are not adequately marked will be returned to the applicant for correction.
- Please do **not** send us any of your original, personal documents or certificates. Please only send us photocopies. We cannot be responsible for the safe return or good condition of any original document you may send as part of your application.
- No highlight marker, please. Your application will be photocopied, and the original highlighting marks will not appear on the photocopies, or may mask out the text that is intended to be highlighted.
- Beginning February 1, please be prepared to respond to any request(s) for additional support documentation. We may call or write to clarify item(s) in your application. We thank you in advance for your most timely response.

Fellows Timeline	
These dates are provided for your information and planning. Dates other than the Fellows application deadline and the AVIR annual meeting are tentative.	
Feb 01 Feb 15 Mar 01 April Each year	Deadline for submission of application Candidate application review begins Notification letters mailed to candidates — AVIR Annual Meeting – New Orleans, LA <u>Fellow activities to be scheduled:</u> - <i>Induction to AVIR Fellowship</i> - <i>Introduction to AVIR membership</i>

Congratulations on your continued pursuit of excellence!