**2025 Recommendation Form for ABCT Members for Fellow Status**

**Letter writers MUST use this fillable form for all letters of recommendation. Please submit your letter via email using the link at the bottom of this page.**

**Letter Writer Information**

**Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Degree:** \_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check your ABCT membership category:** \_\_\_\_ABCT Fellow \_\_\_\_\_ ABCT Member

**Name of ABCT member for whom you are writing a letter:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for writing a letter of recommendation for Fellow status for the applicant named above. Fellow status is a high honor bestowed by ABCT to distinguished full members. ABCT is committed to supporting diversity, equity, and inclusiveness when evaluating members for Fellow status. Applicants for Fellow status have chosen to be evaluated in one or more of 6 specific areas (see list below) in which they have **made outstanding and sustainable contributions to the field of behavioral and cognitive therapies. When writing your letter of recommendation, please address the specific area(s) the applicant has told you they indicated on their submission.** The following website contains *“Guidelines for Applicants and Letter Writers for Fellow Status”* and other information describing the ABCT Fellow Status and criteria: <https://www.abct.org/membership/fellow-members>. Please note that while service to ABCT will be considered by the Committee, service to ABCT is not sufficient by itself to meet the criteria for Fellow status and should not be a major emphasis in describing “outstanding and sustained accomplishments.”.

**Please check 1 or more areas you will address in your recommendation letter.**

1. \_\_\_\_\_\_ Clinical practice
2. \_\_\_\_\_\_ Education and training
3. \_\_\_\_\_\_ Advocacy/policy/public education
4. \_\_\_\_\_\_ Dissemination/implementation
5. \_\_\_\_\_\_ Research
6. \_\_\_\_\_\_ Equity, inclusion, and diversity

All letters of recommendation are due no later than July 1st.

**Please submit your letter of recommendation for the applicant on the next page.**

Letter Writer’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submit this letter of recommendation by email to** **fellows@abct.org**