

## Reference Letter

NIH 2674-13

Application Tracking Code \*

Referee Name: \*

Your First Name

Your Middle Name

Your Last Name

Referee Email Address \*

Confirm Referee Email Address \*

Referee Employment Organization \*

Referee Position Title \*

Reference Letter \*

Enter Text

Please type or paste reference letter text into the box. For ease, you may draft the letter in a word processing program such as Microsoft Word and copy the text into the space provided. [Click here for additional guidance regarding reference letters.](#)

PREVIEW

- By checking this box, I certify that I am submitting the above reference letter on behalf of an applicant to the NIH LRP and that I am providing my electronic signature of this document. I understand that my electronic signature is intended to be the legal equivalent of my handwritten signature.
- By checking this box, I understand this reference letter will be used by NIH officials during the review of the individual's application to help determine the applicant's eligibility/suitability for participation in the LRP, and that this letter shall be held in confidence and is protected from unauthorized disclosure according to the Privacy Act System of Records #09-25-0165 (see Confidentiality and Privacy Act Notice).

I'm not a robot



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[Privacy Act 09-25-0165](#)

SUBMIT

CANCEL

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