

Office of Education

Dear Community Preceptor:

Thank you for your interest in the program at the New Jersey Medical School. We appreciate your passion and willingness to volunteer your time to teach the medical students. As part of the requirements of the Liaison Committee on Medical Education (LCME) standards for accreditation, all voluntary physicians **MUST** have faculty appointment at New Jersey Medical School. We recognize that you are extremely busy, but ask that you fill out the following forms listed below in order to expedite your application. These forms are available under the Faculty Appointment Information/Application tab. **The fields in the PDF files are fillable therefore you can type the information into each field and save/print the form if you prefer.**

- Disclosure and Authorization Form
- Paid & Volunteer Faculty Personal Data Form (2 pages)
- Personal Data Form
- Request for Peer Recommendation Letters (Names and contact information for 3 individuals who are willing to write recommendation letters in support of your faculty appointment – ***we will reach out to individuals on your behalf.***)
- 1 copy of your current medical license, DEA, and CDS
- CV (as a WORD document)

Please return **ALL** of the documents listed above to the following address:

Dr. Lissette Cespedes  
Office of Education  
185 South Orange Avenue  
MSB Room C642  
Newark, NJ 07103

We look forward to working with you and/or your office practice designee to ensure that your appointment application is received and processed as expeditiously as possible.

If you have any questions, please feel free to contact us at (973) 972-4823.

Thank you for your interest and participation in our programs at NJMS.

Sincerely,



Lissette Cespedes, MD  
Patient Centered Medicine Course Director