THE COMMONWEALTH FUND FELLOWSHIP IN HEALTH POLICY LEADERSHIP AT HARVARD UNIVERSITY

RECOMMENDATION FORM
2027-2028

TO THE RECOMMENDER

Instructions
Admissions policy requires applicants to solicit three letters of recommendation and submit contact information for their recommenders with the application. Please complete this recommendation form (Questions 1-8) for the applicant.

If you wish to add a separate sheet for your comments, please endorse it with your signature.

All completed forms must be uploaded to the online portal by December 15, 2026. Please contact Jackie Wright, Program Coordinator, at jackie_wright@hms.harvard.edu if you have any questions about the form.

May we contact you if we have additional questions? ☐ Yes ☐ No

APPLICANT NAME:

Last	First	Middle

PLEASE INDICATE CANDIDATE'S GRADUATE SCHOOL

☐ Harvard T.H. Chan School of Public Health

☐ Harvard Kennedy School

RECOMMENDER NAME

Last	First	Middle

Job Title	Institution

Work Address	City	State	Zip

Work Telephone	Work Email

For questions, please contact:

Joan Y. Reede, MD, MPH, MS, MBA
Director, The Commonwealth Fund Fellowship in Health Policy Leadership at Harvard University
Harvard Medical School
Telephone: 617-432-2922
Email: cff_occe@hms.harvard.edu

Sample

QUESTIONS

The Commonwealth Fund Fellowship in Health Policy Leadership at Harvard University appreciates your specific and frank answers concerning the applicant, stating deficiencies as well as merits. We are primarily interested in selecting fellows with commitment to advancing systems changes to improve the health for all, with emphasis on disadvantaged, vulnerable and uninsured populations, as well as fellows with outstanding intellectual promise and sufficient preparation to participate successfully in rigorous fellowship and academic training. We would appreciate your opinion of the applicant's leadership experience/leadership potential and their suitability for a career in policy, health care delivery, public health, and/or academia. If you need more space for your responses, you may attach an additional document.

1. How long have you known the applicant and in what connection?

2. What do you consider to be the applicant's strengths? You may wish to comment on breadth of knowledge, quality of oral and written expression and analytic ability.

3. Please describe some activity or program in which the applicant was involved that illustrates their special abilities, and/or leadership skills or potential.

4. What do you consider to be the applicant's weaknesses?

5. How well do you think the applicant has considered plans for graduate study, and whether this study will be of value in their development in the field of public health and health policy.

Sample

6. Please rate the applicant in the areas indicated below.

We are interested in your comparison of the applicant with others in a particular reference group, such as a seminar or graduating class. Please identify this reference group in the space provided.

REFERENCE GROUP

	SUPERIOR (TOP 5%) 1	EXCELLENT (TOP 10%) 2	GOOD (TOP 30%) 3	AVERAGE (TOP 30-50%) 4	MARGINAL (BELOW 50%) 5	UNABLE TO COMMENT 6
NATIVE INTELLECTUAL ABILITY						
ANALYTIC ABILITY						
QUANTITATIVE ABILITY						
PROBLEM-SOLVING ORIENTATION						
BREADTH OF GENERAL KNOWLEDGE						
QUALITY OF ORAL EXPRESSION						
QUALITY OF WRITTEN EXPRESSION						
MOTIVATION/ENERGY						
PERSEVERANCE						
LEADERSHIP CAPACITY						
ORGANIZATIONAL ABILITY						
CLINICAL ABILITY						
JUDGMENT/CRITICAL SENSE						
EMOTIONAL MATURITY						
PROMISE AS A LEADER IN HEALTH CARE DELIVERY SYSTEMS AND HEALTH POLICY						
ABILITY OR PROMISE AS A MANAGER						
COMMITMENT TO PUBLIC SERVICE						
PROFESSIONAL INTEGRITY						
WORKS WELL WITH DIVERSE GROUPS OF PEOPLE						
FLEXIBILITY IN NEW SITUATIONS						
COLLEGIALITY/ABILITY TO WORK WITH OTHERS						
OVERALL EVALUATION						

Sample

7. Please rate the applicant in overall ability and promise in comparison with other individuals at the same level of training by checking **one** of the appropriate boxes below.

- ☐ EQUAL TO THE BEST IN ANY DEPARTMENT.
- ☐ WILL PERFORM AS A SUPERIOR LEVEL WHEREVER ADMITTED.
- ☐ PERFORMANCE SHOULD BE UP TO AVERAGE OF MOST GRADUATE STUDENTS.
- ☐ QUALIFICATIONS MARGINAL, BUT WARRANTS CONSIDERATION.
- ☐ QUESTIONABLE AS TO WHETHER ADMISSION TO FURTHER STUDY IS WARRANTED.
- ☐ NOT ABLE TO JUDGE.

8. Additional Comments.

Please make any additional comments about the applicant's potential or personal qualities which you feel would be helpful to the Advisory Committee of The Commonwealth Fund Fellowship in Health Policy Leadership at Harvard University. We are especially interested in anything you may add that would not otherwise be apparent in the candidate's record – i.e. evidence of character, values, a point of interest or concern about which the applicant is particularly enthusiastic, and any special talent or quality they possess. Please feel free to elaborate on the applicant's performance on the basis of which you arrived at your ranking in question 6. If possible, please cite some specific illustrations of the applicant's performances. If you need more space for your responses, you may attach an additional document. Thank you.

Signature	Date

Sample