Representation of Sponsoring Institution
Re: Business Associate Agreements with
Accreditation Council for Graduate Medical Education (ACGME)

On behalf of the below-named Sponsoring Institution of one or more graduate medical education programs, I represent that:

(1) Sponsoring Institution has taken, and will continue to take, that action necessary, consistent with law, to ensure that ACGME has access to information necessary to perform its accreditation function, which information is in the control of the Sponsoring Institution, participating institutions, and clinical sites.

(2) Sponsoring Institution understands that ACGME has executed separate business associate agreements with the Veterans Health Administration (VHA) and the United States Department of Defense (DoD) that encompass all VHA and DoD facilities.

_____
Sponsoring Institution

_____
Name of Designated Institutional Official

_____
Signature of Designated Institutional Official

_____
ACGME Number of Sponsoring Institution

_____
Date of Signature of Designated Institutional Official