

Society of Surgical Oncology
BREAST SURGICAL ONCOLOGY FELLOWSHIP MATCH
(SSO Breast Match)

APPLICANT RANK ORDER LIST WORKSHEET

1. Rank each program/track **in order of preference**. You may rank as many tracks as you wish. Do not include any track that you consider unacceptable (i.e., you would not want to be matched to the track under any circumstances).
2. Identify each program/track by its Program Name, Description, City, State or Province, and 5-digit Code Number as shown in the List of Participating Programs available on the SSO Breast Match web site (natmatch.com/ssobreast). **If you cannot find a program/track in the online List, check with the Program Director involved.**
3. When you have finalized your rankings, use this worksheet to prepare your Rank Order List.

RANK NUMBER	CITY & STATE or PROVINCE	PROGRAM NAME	DESCRIPTION	CODE NUMBER

Name (Print): _____ Applicant Code Number: _____

Signature: _____ Password: _____ Date: _____

Telephone: _____ E-mail: _____