



*Prevention & Medical Care
To Help You Live Better, Longer.*

Eligible Shareholder Credentialing Form

Eligible Shareholder:

Shares:

Start Date at VMG:

Team Leader Recommends for Shares: Yes _____ No _____ Defer _____

1. Understanding of VMG Compact?

2. VMG Organizational Fit?

3. Teamwork Concerns?

4. Patient Satisfaction Surveys?

5. Incident Reports?

6. FTE/Schedule/Financial Stability?

7. Chart Completion/Inbox Management?

8. Growth Opportunities?

9. Unique skills practitioner brings to VMG?

Reviewed by Directors Committee Date: _____

Recommendation for Shares: Yes _____ No _____ Defer _____

Performance Improvement Plan: Yes _____ No _____