

Exhibit C

Home Country or Country of Citizenship: _____

_____ **Deferral*** A deferral is not a waiver; it is a one year deferred/delayed start of training. A deferral must be agreed to by both parties prior to submission of the request.

Please state the reason for your request. Be as detailed as possible and include timelines where applicable. 10 point font minimum. Do not exceed parameters of the space provided. Additional information may be submitted via email to policy@nrmp.org

Walid Khass (WK) is ineligible to begin training on 7/1/19 for two reasons. **First**, we learned that between 2012-2017 WK made a significant number of anti-Semitic, anti-gay, and/or racially insensitive social media posts, some of which condoned and/or encouraged violence (*see, e.g., p. 93*).¹ His views are incompatible with universal, basic tenets of medical professionalism and entirely inconsistent with various Hospital- and program-level policies. Accordingly, WK does not meet the Hospital's standards for employment/appointment as a trainee. In addition to demonstrating shockingly poor judgment, the public manifestation of these views compromises WK's ability to, and interferes with our ability to, (i) serve a patient population that includes a large orthodox Jewish population and (ii) facilitate a respectful, inclusive work environment for our employees and medical staff. **Moreover**, we learned from publicly available court documents that WK's graduation will be delayed well beyond 7/1. On 2/4/19, St. George's University ("SGU") placed WK on a leave of absence (p. 26). On 4/8/19, SGU's Faculty Judiciary Board recommended suspending WK for 3 months from that day and conditioning his ability to return at the end of the suspension period on meeting certain requirements (p. 95). WK is currently suspended (p. 62). WK concedes that he has 7 weeks of coursework to complete (p. 7); as such, his graduation is delayed until well after 7/1, rendering him ineligible to join our program. Accordingly, we request a waiver from this match; moreover, with a waiver, we can seek another candidate.

Have you notified your matched applicant(s) of your waiver request? XXX Y N
A copy of this request is being sent to the applicant through his counsel.

(The program must submit the request to the NRMP with a copy to each applicant whose position is included in the request.)

Have you been in contact with other applicants? Y XXX N

If Yes, please list the name of the applicants(s) with whom you spoke.

Applicant: N/A

(note: contacting an applicant(s) absent a waiver from the NRMP is a potential Match violation)

Closure/Loss of Accreditation:

For requests based on program closure or loss of accreditation, please describe the method that will be employed to assist each applicant in securing another training position.

Please provide any additional information you believe is pertinent to your request. Please submit to policy@nrmp.org any supporting documentation (e.g., ERAS applications, visa documentation, and institutional policies) that substantiates your claim.

Please see attached Documents 1 - 12:

- Document 1: Selected court documents from a proceeding brought by WK against SGU
- Document 2: Canary Mission Aggregation of WK Social Media Posts
- Document 3: Hospital Policy on Anti-Harassment
- Document 4: GMEC Harassment policy
- Document 5: Social Networking Guidelines (excerpted from the House Staff Manual)
- Document 6: Policy on Governing Practices for the Selection of Residents
- Document 7: NewYork-Presbyterian Code of Conduct (including Credo of Respect)
- Document 8: Resident Professional Conduct
- Document 9: ACGME Milestones Document (includes Professionalism)
- Document 10: AMA Code of Medical Ethics, Chapter 1 (see Sections 1.1.1-1.1.3 in particular)
- Document 11: Hippocratic Oath and Declaration of Geneva
- Document 12: Charter on Medical Professionalism

Please save the form your computer with a different filename, convert to a PDF, and send the PDF as an attachment to policy@nrmp.org.