INSTRUCTION PAGE

INCLUDE DATE OF CV INCLUDE NAME ON EACH PAGE ADD OR DELETE TEMPLATE LINES OR SECTIONS DO NOT INCLUDE

SOCIAL SECURITY NUMBER

LIST "PROFESSIONAL APPOINTMENTS," "ACADEMIC APPOINTMENTS," AND "RESEARCH SUPPORT" SECTIONS RECENT TO OLDEST.

LIST OTHER SECTIONS CHRONOLOGICALLY.

Following is the recommended format for a curriculum vitae and bibliography at Case Western Reserve University School of Medicine.

All faculty members should maintain a complete and up-to-date curriculum vitae and bibliography.

A recommended template for your CV begins at page two.

- 1. Personal data: name; address; education with dates, places, and types of degrees; postgraduate training with dates and places.
- 2. Professional appointments: dates, names of departments and institutions, and the rank of the appointment.
- 3. Licensure and board certification when appropriate.

AS NECESSARY TO PROVIDE COMPLETE INFORMATION

- 4. Membership in professional societies.
- 5. Honors and awards.
- 6. Professional service: service on study sections, editorial boards, professional societies, advisory groups, etc.
- 7. Service on medical school, hospital or university committees, including the names of the committees and dates of service.
- 8. Past and present teaching activities: teaching of medical, graduate, postgraduate and undergraduate students and house officers, as well as teaching in undergraduate and other professional schools of the university. The documentation should cover the frequency of the contributions, the number of actual contact hours and additional input such as planning, evaluation and coordination. A listing of former graduate students and their present status would also be a helpful addition. The completed Teaching and Clinical Service Activities Form may substitute for this section of the curriculum vitae for the purposes of the promotions committee. It is the responsibility of each faculty member to maintain a current listing of all teaching contributions.
- 9. Past and present research support: this list should include the granting agency, duration of the grant, title, the principal investigator, the percent effort of the nominee, and the total direct costs awarded. Applications pending review should be included. If desired, research support may be listed separately as an addendum to the curriculum vitae.
- 10. Bibliography: references should include the names of all authors, titles of articles, and inclusive pages. Peerreviewed articles, other articles, abstracts, presentations, chapters, and books should be listed separately, as should articles that have been submitted or are in preparation.

CURRICULUM VITAE FOR CWRU SCHOOL OF MEDICINE

DATE

PERSONAL INFORMATION

Name: (last, first, middle)

Education

School: (begin with undergraduate degree)

Degree:

Dates: (start – end)

School:

Degree:

Dates: (start - end)

Post-Graduate Training

Institution: (name, address)

Position:

Dates: (start – end)

Institution: (name, address)

Position:

Dates: (start - end)

Ph.D. Thesis

Title:

Ph.D. Thesis Committee: (list)

Contact Information

Office Address: (street, city, state, zip)
Office Phone: (area code and number)
Beeper: (area code and number)

E-mail:

Facsimile: (area code and number)

Other (optional)

Home Address: (street, city, state, zip)

PROFESSIONAL APPOINTMENTS (list recent to oldest)

Position/Rank:

Institution/Department:

Dates: (inclusive)

Position/Rank:

Institution/Department:

Dates: (inclusive)

ACADEMIC APPOINTMENTS (list recent to oldest)

Position/Rank:

Institution/Department:

Dates: (inclusive)

Position/Rank:

Institution/Department:

Dates: (inclusive)

CERTIFICATION AND LICENSURE

Name of Board: Date of Certificate: Licensure State/Number:

Date Issued: (start – end)

Name of Board: Date of Certificate: Licensure State/Number:

Date Issued: (start – end)

HONORS AND AWARDS

(list Honor / Award name, institution and date received)

MEMBERSHIP IN PROFESSIONAL SOCIETIES

(list Society, role and date received/ended) (i.e. Member, President, etc.)

PROFESSIONAL SERVICES

Editorial Boards

Journal:

Dates of Service: (start – end)

Journal:

Dates of Service: (start - end

Study Sections/Grant Review Committees

Section/Committee:

Dates of Service: (start – end)

Section/Committee:

Dates of Service: (start – end)

Advisory Groups (i.e. foundation services, etc.)

Title:

Dates of Service: (start - end)

Title:

Dates of Service: (start – end)

COMMITTEE SERVICE

National

Organization:

Committee Name/Role:

Dates of Service: (start – end)

Organization:

Committee Name/Role:

Dates of Service: (start – end)

Hospital Affiliate

Committee Name/Role:

Dates of Service: (start – end)

Committee Name/Role:

Dates of Service: (start – end)

NAME 2

Educational Committees

Committee Name/Role:

Dates of Service: (start – end)

Committee Name/Role:

Dates of Service: (start - end)

TEACHING ACTIVITIES

Curriculum/Course Development

(title, group, date, and time dedicated to activity)

1.

<u>Presentations</u> (including post-graduate and continuing medical education) (should be numbered and in chronological order)

(title, group, date)

1.

Visiting Professorships

(title, group, date)

1.

<u>Trainees / Mentees</u> (list former graduate/post-graduate students, years of training and their current status. As applicable, list as: medical students, master's level trainees, Ph.D. candidates and fellows [post-doctoral and clinical])

(name, years of training, current status)

1.

Teaching Material Produced

(title, date developed)

1.

Teaching Administration (e.g. residency directorship)

(title, facility, date)

1.

Teaching Activities (e.g. lectures to trainees, teaching rotations)

(activity, time spent, date)

1.

RESEARCH SUPPORT (list recent to oldest)

(granting agency, title of project, principal investigator, percent of effort, total direct costs awarded, dates inclusive [start – end]}

1.

BIBLIOGRAPHY (published or in press only) (should be numbered and in chronological order)

Peer Reviewed Articles

(author(s) [list of authors], title of article, journal and year, volume, pages)

1.

2.

3.

NAME 3

Edited Books, Monographs or Journal Volumes

```
(editor(s), title, year, volume (if applicable), publisher, city)
```

Invited, Non-Peer Reviewed

```
(author(s), title of article, journal and year, volume, pages) 1.
```

Book Chapters (published or in press only)

```
(author(s), title of chapter, In: author(s), title of book, edition, city, state: publisher, year, pages)
```

Audio/Video/CD-Rom, etc.

```
(artist, title of work, date, medium) 1.
```

Editorials

```
(author(s), title of editorial, journal and year, volume, pages) 1.
```

Letters

```
(author(s), title of letter, journal and year, volume, pages)
```

Abstracts

(author(s), title of abstract, journal and year, volume, pages) (Abstract presentations: also list meeting, location, and meeting date)

1.

NAME 4