

[FIRST NAME] [LAST NAME], [DEGREES]

Work Address
 City, State Zip Code
 Work Phone Number
 Work Email: email@address.com

Home Address
 City, State Zip Code
 Home Phone Number
 Secondary Email: email@address.com

Education

Ph.D., (Field), University, City, State/Country Year
 Thesis Title:
 Advisor:
 M.D., University, City, State/Country Year
 B.S./B.A., Major (*include honors*), University, City, State/County Year

Post-Doctoral Training

Fellowship, University/Institution, City, State Years
 Residency, University/Institution, City, State Years
 Internship, University/Institution, City, State Years
 Postdoctoral Fellow/Scholar Years
 Supervisor:
 Department, University/Institution, City, State

Academic Appointments

Associate Professor Years
 Department, University, City, State
 Tenure Year
 Assistant Professor Years
 Department, University, City, State

Leadership Positions

Director, Center for _____ Years
 University/Institution, City, State

Other Positions and Employment

Private Practice, Institution, City, State Years

Honors and Awards

Name of Award (Organization) Year
 Fellow, American College of _____ Years

Professional Memberships and Activities

Society Name Years
 Member, Committee Years

Editorial Responsibilities

Journal Name, Role	Years
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Educational Activities

Educational Administration and Leadership

Member, Committee	Years
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Director, Program	Years
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Teaching Activities

Course Name, Role, Number of Students, Session Titles	Years
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Clinical Teaching and Supervision

Responsibility, Location and Level of Effort	Years
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Graduate Student Education

Member, Program or Committee	Years
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External Educational Activities

Title, Conference Name, Place	Date
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Title, Conference Name, Place	Date
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Development of Curricula and Educational Materials

Description, Location	Year
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Advising and Mentoring

Students

Name, Program, Role	Years
Current Position	

Residents

Name, Program, Role	Years
Current Position	

Postdoctoral Trainees

Name, Program, Role	Years
Current Position	

Faculty

Name, Program, Role	Years
Current Position	

Grants

Current

Agency, Grant Number, Principal Investigator	Years
Title	
Description (1 sentence)	
Total, Direct, and Indirect Costs	

Pending

Agency, Grant Number, Principal Investigator	Years
Title	
Description (1 sentence)	

Total, direct, and Indirect Costs
Role: % effort

Completed

Agency, Grant Number, Principal Investigator Title Years
Description (1 sentence)
Total, Direct, and Indirect Costs
Role: % effort

Current Unfunded Projects

Brief Description of the Project Years

Technology Development

Patents

Patent Title, Number Year

Devices/Software Applications

Description Year

Clinical Practice

Certification and Licensure

Diplomate, ABMS Board Year

Subspecialty Certification, Subspecialty Board Year

State Medical Licenses (*both active and inactive, do not include #s*) Year

Clinical Discipline

Discipline, Specialty

Clinical Activities

Name and location of practice, Type of activity, Frequency Years

Clinical Innovations and Quality Improvement Projects

Brief description of project and outcomes, Location of project Years

Scholarship

Scholarship of Integration

Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Books and Chapters

1. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
2. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
3. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).

Non-Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Non-Print / Online Materials

1. Authors. Title. Source (URL) (year).
2. Authors. Title. Source (URL) (year).
3. Authors. Title. Source (URL) (year).

Scholarship of Application (New Interpretation of Knowledge)

Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Books and Chapters

1. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
2. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
3. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).

Non-Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Non-Print / Online Materials

1. Authors. Title. Source (URL) (year).
2. Authors. Title. Source (URL) (year).
3. Authors. Title. Source (URL) (year).

Scholarship of Research (Fundamental Scientific Discoveries)

Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Books and Chapters

1. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
2. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).
3. Authors. Title. In Book Title (Eds.) pp-pp. Publisher (year).

Non-Peer-Reviewed Publications

1. Authors. Title. Journal Vol: pp-pp (year).
2. Authors. Title. Journal Vol: pp-pp (year).
3. Authors. Title. Journal Vol: pp-pp (year).

Non-Print / Online Materials

1. Authors. Title. Source (URL) (year).
2. Authors. Title. Source (URL) (year).
3. Authors. Title. Source (URL) (year).

Invited Presentations

International

Title of presentation, Institution or Meeting, Location

Date

National
 Title of presentation, Institution or Meeting, Location Date

Regional
 Title of presentation, Institution or Meeting, Location Date

Local
 Title of presentation, Institution or Meeting, Location Date

Other Presentations, Posters, and Abstracts

International
 Authors, title of presentations. Meeting Name. (Abstract reference if published) Date

National
 Authors, title of presentations. Meeting Name. (Abstract reference if published) Date

Regional
 Authors, title of presentations. Meeting Name. (Abstract reference if published) Date

Local
 Authors, title of presentations. Meeting Name. (Abstract reference if published) Date

Professional Development

Program/Course (Organization), Location

Committee Assignments and Administrative Service

Department, School, and University
 Committee Name (Role), Organization Years

External Professional Service
 Committee Name (Role), Organization Years

Community Service

Organization, Role/Responsibility Years