**DREXEL UNIVERSITY COLLEGE OF MEDICINE**

# MODEL CURRICULUM VITAE \*\*\* (please include Months and Years)

1. **Name in full** and **Degree**
2. **Current Home and Professional mailing addresses, telephone number(s), and E-mail addresses**
3. **Education:**

Last degree listed first. Name of University, year degree granted Major

Thesis Title (if applicable)

List all other degrees, institutions, years degrees awarded

# Postgraduate Training:

List chronologically, starting with earliest position

Give years, institutions, type of training

1. **Employment History and Faculty Appointments:**

List chronologically, starting with earliest position Include consulting positions

Give years, institutions, positions held

# Board Certifications and Licensure

# American Board Certification number(s), month/year issued and month/year expire;

# State Medical Board licensure number(s), month/year issued and month/year expire;

# DEA number and date (including re-certification # & date) (if appropriate)

1. **Military Service (if appropriate)**
2. **Honors and Awards**

List chronologically, starting with earliest

Give name of award and/or awarding institutions Indicate nature of award if not apparent

# Memberships and Offices in Professional Societies

1. **Professional Committees and Administrative Service**
	1. Institutional: committees on which you have served or chaired Give years of membership
	2. Extramural:

Local and Regional National and International Include:

* + 1. membership on editorial boards
		2. editorship of symposium volume, text or journal
		3. service as examiner for professional organization
		4. reviewer of grants for extramural funding sources
		5. reviewer of manuscripts for journal publications
		6. convener of symposium or of conferences or of workshop in one's field; etc. Provide name of organization or publication, your role and years of service

# Community Service

Service not related to the institution, but provided by you either in your professional or in some other capacity

List chronologically, earliest first Give your role and the organization

# Educational Activities:

* 1. Courses/Clerkships/Programs
		1. Taught
		2. Coordinated
		3. Developed

Include: course title, audience, years of involvement

* 1. Advising/Mentoring/Tutoring
		1. Participated
		2. Coordinated
		3. Developed

Include: name of advisee, current position of advisee, years of involvement

* 1. Educational Materials: List texts, atlases, CAI, manuals, evaluation tools, etc. developed that are used only within the institution

# Clinical Activities

* 1. Outline of major clinical activities including
		1. Rounds, Clinics
		2. Development and/or implementation of clinical programs, quality assessment of programs
	2. Health care education of the lay community
		1. Presentations
		2. Publications in the lay press

# Support

* 1. List past and present extramural support received
	2. List past and present intramural support received

Include role in the project, title of study, funding agencies, including appropriate ID number, effective dates and total direct costs of award

* 1. List grant applications already submitted and still pending, with same information as above

# Graduate Students, Postdoctoral Fellows and Postgraduate Medical Trainees

* 1. List graduate students who have received advanced degrees (Master's, Ph.D.) with you as their supervisor

Give name of student, years of study, thesis title, date that degree was awarded, department in which study was done and institution awarding degree

* 1. List postdoctoral fellows and postgraduate medical trainees that have been under your direct supervision for their training. Give names, years, research or clinical study and means of support (if training grant or NRSA)

# Bibliography - listed under the following separate headings and Peer-Review Journals

* 1. Published full-length papers

A chronological list beginning with the earliest, with complete citations, including: Names and initials of all authors

Title of the article

Name of journal, volume, inclusive page numbers, year

# \*\*\*\*\*Indicate if peer-reviewed by an asterisk before the citation

N.B. Items "accepted for publication" should be so indicated

Items "submitted" can be included; journal and dates submitted should be indicated

* 1. Books and chapters in books

Provide complete citations, including Press and City of printing

* 1. Other Communications: video tapes, discs, slide atlases, computer programs, etc. used outside the institution
	2. Book Reviews

Letters to Editors (when these are not articles, which they can be, as in Nature [London] or J. Mol. Biol.)

Provide complete citations

* 1. Abstracts (Optional, but if included, provide complete citations). **Indicate if peer reviewed by asterisk**

# Presentations

* 1. By invitation: (May include invited seminar presentations, except those for job interviews; also presentation at Society Meetings, Professional Boards, etc.)

Local National International

* 1. By competition or Peer-Review

For all presentations, provide type, full title, place presented, under what auspices (department, society, etc.) date of presentation

**Referenced from Drexel University College of Medicine Faculty Appointments and Promotions Criteria Document – December 4, 2008 (Revised 2020)**