

**CURRICULUM VITAE – ABSTRACT**

Revised 4/2024

**NAME:** \_\_\_\_\_

**Current Rank:** \_\_\_\_\_

**EDUCATION** (Residency, Fellowship or Graduate School Training):

**School/Program**

**Degree**

**Date**

•		
•		
•		

**ACADEMIC APPOINTMENTS:** (List current appointment first)

**Institution**

**Rank**

**Dates**

•		
•		
•		

**TEACHING ACTIVITIES:** Briefly summarize major classroom, laboratory or clinical teaching responsibilities over the past 5 years or while in current rank. Also include your course leadership and curriculum development activities. You must also submit a teaching portfolio. See [Teaching Portfolio](#) for suggested format.

•
•
•

**CLINICAL ACTIVITIES:** Briefly summarize your principal clinical activities over the past 5 years or while in rank (e.g., type of activity [clinics, attending, surgical, consultation), average number of hours/week or months/year). Also include clinical program leadership and quality improvement activities. Faculty members with extensive clinical duties should submit a Clinician's Portfolio. See [Clinician's Portfolio](#) for format.

•
•
•

**RESEARCH AND SCHOLARSHIP:** Briefly summarize research and scholarly activities over the past 5 years or while in rank, including research focus, major discoveries, or other important aspects of your work.

•
•
•

**PUBLICATIONS/SCHOLARSHIP Note: Publications included here should match those listed on your C.V.**

Number of Original Articles in Peer-Reviewed Journals (TOTAL): \_\_\_\_\_

First Author \_\_\_\_\_

Senior Author \_\_\_\_\_

Other Co-Author \_\_\_\_\_

Number of Books: (TOTAL): \_\_\_\_\_

Number of other publications (scholarly reviews, symposium papers, editorials & book chapters): \_\_\_\_\_

Number of Letters-to-the-Editor, Other Publications: \_\_\_\_\_

Number of published or presented scientific abstracts (TOTAL): \_\_\_\_\_

Refereed Abstracts: \_\_\_\_\_

Un-Refereed Abstracts: \_\_\_\_\_

Patient education materials, curricula, clinical guidelines, case studies or other scholarly works. *List only if completed and available for review in written or electronic format:* \_\_\_\_\_

**PUBLIC AND UNIVERSITY SERVICE ACTIVITIES/ PROFESSIONAL SOCIETY MEMBERSHIPS/HONORS:**

List highlights

•
•
•

**FUNDED GRANTS (RESEARCH, TRAINING OR OTHER) IN PAST 5 YEARS or SINCE LAST PROMOTION, whichever is longer. Note: Grant information reported here should be consistent with grants listed for this time-period on your C.V.**

Reporting Since _____ (Year)	As Principal Investigator/Program Director (on primary or sub-award)		As Co-Investigator/Key Personnel (not consultant)	
	Number of Grants	Total Direct Costs	Number of Grants	Total Direct Costs
Federal (NIH, NSF, VA, etc.)				
Foundation/Professional Assoc. (RWJ, AHA, etc.)				
Industry				
Internal/Other Grants				