First Name Last Name, M.D., Ph.D.

Professional Street Address
City, State zip code
(Area code) phone number
email@address.com

If you prefer not to include your professional address, you may include your personal email address and telephone number

Last updated: include today's date

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Education *[Note: in reverse chronological order]*

Fellowship, Your University, City, State	Years
Residency, Your University, City, State	Years
M.D., Your University, City, State	Years
B.S. in Discipline (magna cum laude), Your University, City, State	Years

Current Position(s)

Academic Rank, department
Director, Center for Whatever
Your medical school or university
City, State

Professional Experience *[Note: in reverse chronological order]*

Director, Center for Whatever
Name of Medical School or University
City, State

Chief Resident
Department of
Name of University
City, State
[Note: include only if it is an appointed position requiring an extension of the residency]

Academic Appointments *[Note: in reverse chronological order]*

Associate Professor Department of Name of University City, State	Year - Present
Assistant Professor Department of Name of University City, State	Years

Other Positions and Experience

(List non-academic employment and experience / history in reverse chronological order *Position held, employer/ organization, location)*	Years

Certification and Licensure

	Years

Diplomate, Your ABMS Board
Subspecialty Certification, Your Subspecialty Board
State Medical License (active and inactive, without numbers)
Interpretation Certification

Professional Memberships and Activities
[List these, in groupings by professional organization, in reverse chronological order, noting leadership positions and other positions held]   Years

Editorial Board Appointments
[List in reverse chronological order]   Include relevant dates

Committee Assignments and Administrative Services
[List in reverse chronological order, noting leadership positions held. Include university and non-university activities (e.g., work with NIH study groups).]   Years

Clinical / Quality Improvement Activities
(List clinical responsibilities and other clinical activities that include number of weeks, and percentage/time effort)

Educational Activities
- ☑ *Identify your teaching activities here or write "See attached Teaching Portfolio."*
- ☑ *List in reverse chronological order, noting your role (course developer, course director, lecturer)*
- ☑ *Include advising and mentoring responsibilities (only list those with a significant time investment that are outside of "normal" teaching duties, list project mentored and result)*
  - ○ *Include mentee name, institution, mentee level/ rank, role, project mentored, next position/accomplishment*
- ☑ *Categorize educational activities as follows: Educational Administration (Director, Dean, etc.), Training Program Committees, Course and Curriculum Development, Courses Directed, Didactic Sessions, Clinical Teaching, Laboratory Teaching, Small Group Teaching, Graduate Student Committees*

[Note: Reflect the years you undertake each activity]

Honors and Awards
[Receipt of competitive scholarships, fellowships, and assistantships; names of scholastic honors, and teaching or research awards. Note: you may also list selective fellowship programs, those to which you were accepted as a competitive, as opposed to first-come, first-serve, application process.]   Years

Grants and Contract Awards
- ☑ *List under sections of pending, current, and past in reverse chronological order using NIH format, even for non-NIH grants.*
- ☑ *Include the title of grant, the granting agency, grant number, award total, demarcating total direct and indirect costs*
- ☑ *State your role, also identifying the PI (principle investigator) if you are not the PI, and percent of effort*
- ☑ *If you include contracts use two subheadings, separating contracts from grant awards*
- ☑ *If voluminous, truncate this listing to the most recent decade (or past five years) and note the limitation in the heading.*

[Note: Include the years of each award]

Publications   Include relevant Dates

☑ *List your publications in chronological order for easy updating*
☑ *Number these and highlight your name in bold*
☑ *Follow this order with appropriate subheadings- peer-reviewed, non-peer-reviewed publications, articles accepted for publication, books and monographs, evidence of works in progress (complete articles published in conference proceedings, book chapters, review*

articles, editorials as indicated), development and/or publication of educational materials, development of major curricular offerings or innovative educational programs, non-print materials

[Note: if you are not listed as first author on publications for which your mentored student is listed, note that role with an asterisk or other indicator]

Published Abstracts and Presentations

[List these in reverse chronological order, use an asterisk or other explained notation to demarcate invited talks and meetings that you helped to organize.]

Oral Presentations *[Note: this section is for presentations given where you are an author]*

Invited Presentations   Date

National/International Meetings *(designate if invited)*   Date

Local/Regional Meetings   Date

Peer-reviewed Presentations *(including Workshops)*   Date

Grand Rounds Presentations   Date

Poster Presentations

National/International Meetings   Date

Local/Regional Meetings   Date

Social Media

(List professional activities utilizing social media)

Other Creative Products

[List CDs, interviews, simulations, films, websites, webinars, case vignettes you authored and are in use, and any other creative work products. Indicate your role in the creation of the product – creator, author, co-author, webmaster, etc.]   Date

Other Scholarly Products

(Include activities in which you have participated but did not result in authorship e.g. member of a practice network, participated in an expert panel, etc.)   Date

Patents and Technology Transfer

[List in chronological order to permit easy updating. Include and patent pending or patent applications, with dates of filing. List any technologies licensed to industry or others (military, etc.) with dates of licensure or filing]   Date

Professional Community Activities   Date

(Service to the community, outreach presentations, etc.)