

## STANDARD FORMAT CURRICULUM VITAE

### PERSONAL INFORMATION

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Name: Last, First, Middle  
 Born (optional): Month, Day, Year  
 Place of birth:  
 Citizenship:

#### Education

School (Begin with undergraduate degree)	Degree	Dates (start-end)
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#### Post-graduate Training

Institution City, State	Position	Dates (start-end)
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#### Ph.D. Thesis

Title List Ph.D. Thesis Committee	Date
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#### Contact Information

Office Address: Street Address  
 City, State Zip  
 Office Phone: (Area Code) Number  
 Beeper: (Area Code) Number  
 E-mail:  
 Facsimile (Area Code) Number

#### Other (optional)

Home Address: Street Address  
 City, State Zip  
 Home Phone: (Area Code) Number  
 Marital Status:  
 Children: Name (Age)  
 Social Security Number (optional): 000-00-0000

### PROFESSIONAL APPOINTMENTS *(list from most recent to oldest)*

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Position/Rank	Institution, Department	Dates (inclusive)
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### CERTIFICATION AND LICENSURE

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|-------------------------------------|-------------------------|
| • Name of Board                     | Date of Certification   |
| • Licensure (State), License Number | Date issued (Start-End) |

### HONORS/AWARDS

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Award Name, Institution, Date received

### MEMBERSHIP IN PROFESSIONAL SOCIETIES

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|---|-------------------|
| • Society, Role (e.g., Member, President, etc.) | Dates (Start-End) |
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### PROFESSIONAL SERVICE

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#### Editorial Boards

Journal	Dates of Service (Start-End)
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#### Study Sections/Grant Review Committees

Section/Committee	Dates of Service (Start-End)
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Advisory Groups: (e.g., foundation service, etc.)

**COMMITTEE SERVICE**


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National

Organization Committee Name, Role Dates of Service (Start-End)

Cleveland Clinic Foundation

Committee Name, Role

Dates of Service (Start-End)

Cleveland Clinic Lerner College of Medicine

Committee Name, Role

Dates of Service (Start-End)

Educational Committees

Organization

Committee Name, Role

Dates of Service (Start-End)

Other (e.g., , Institutions before CCF)

Organization

Committee Name, Role

Dates of Service (Start-End)

**TEACHING ACTIVITIES**


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Curriculum/Course Development

- (Title, Group, Date, Time dedicated to activity)

Presentations (including post-graduate and continuing medical education)

- (Title, Group, Date)

Visiting Professorships

- (Title, Group, Date)

Trainees/Mentees (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

Teaching Material Produced

- Title, Date developed

Teaching Administration (e.g., , residency directorship)

- Title

Facility

Date

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

- Activity

Time spent

Date

**RESEARCH SUPPORT (List from current to past)**


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- Granting agency, Title of project, Principal Investigator, Percent of effort, Total direct costs awarded, Dates inclusive (start-end)

**BIBLIOGRAPHY (Published or in press only)**


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Peer-reviewed Articles

- Author(s) [List all authors], Title of article, Journal and Year; Volume, pages.

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 & Year; Volume, pages.

Books Chapters Published or In Press

- 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.

Editorials

1. Author(s), Title of editorial, Journal & Year; Volume, pages.

Letters

1. Author(s), Title of letter, Journal & Year; Volume, pages.

Abstracts

1. Author(s), Title of abstract. Journal & Year; Page: Abstract #

Forthcoming (list papers and chapters in preparation or submitted)

1. Author(s), Title of article.