

# Pitt Public Health Certificate in Teaching Excellence

*Open to all GSPH faculty*

**About** | The Certificate in Teaching Excellence is open to Pitt Public Health faculty of all ranks. Faculty earn the certificate by attending teaching workshops or completing one-on-one consultations with CIDDE instructional designers. The completion of workshops and/or consultations are tracked by the Graduate School of Public Health Office of Student Affairs. The certificate is designed to be completed within a two year period. Further details are sent once the enrollment form on page two is completed and submitted.

**Requirements** | Faculty are required to attend five workshops/consultations at minimum to earn the certificate.

**Workshops** | Workshops are held throughout the academic year in Pitt Public Health and year-round at the University's Center for Instructional Design and Distance Education (CIDDE).

**2012-13 Schedule of Pitt Public Health Workshops** | Details available on Teaching Resources Web page at [www.publichealth.pitt.edu/teaching](http://www.publichealth.pitt.edu/teaching).

Teaching Strategies using CourseWeb | SEPT 26 – 1-2:30pm, 109 Parran Hall

All about Prezi | OCT 31 – 1-2:30pm, 109 Parran Hall

Teaching with Newer Technologies | JAN 30 – 1-2:30pm, 109 Parran Hall

Flipping the Classroom | FEB 27 – 1-2:30pm, 109 Parran Hall

Introduction to Course Design | MAR 27 – 1-2:30pm, 109 Parran Hall

**Suggested CIDDE Workshops** | Held year-round | Complete list available at: [www.cidde.pitt.edu/workshops-archive](http://www.cidde.pitt.edu/workshops-archive).

**Contact** | Robin A. Leaf, MEd, Educational Programs Coordinator, Office of Student Affairs, 114 Parran Hall, [ral9@pitt.edu](mailto:ral9@pitt.edu), PHONE: 648-5984

# Pitt Public Health Certificate in Teaching Excellence ENROLLMENT FORM

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Name: \_\_\_\_\_

Department: \_\_\_\_\_

Rank: \_\_\_\_\_

Office Address: \_\_\_\_\_

Pitt e-mail address: \_\_\_\_\_

Start date: \_\_\_\_\_

*(Note: certificate should be completed within two years of start date.)*

Extension Period—If this a request for a one year extension period to your previous application please place your initials on line below and the date.

\_\_\_\_\_

*initials*

*date*

**Submit completed form to:**

Robin A. Leaf, MEd

Educational Programs Coordinator

Office of Student Affairs | 114 Parran Hall

ral9@pitt.edu | PHONE: 648-5984