**Texas A&M College of Medicine**

**Faculty Record (Modified Curriculum Vitae)**

**Form Version 04/28/17**

Use your computer to complete this form and utilize as much space as necessary, below each heading, to provide the requested information. If you have no information for a topic, write "None" or "NA" under the heading. **Whenever dates are requested throughout the document, list them in chronological order, beginning with the first and ending with the most recent. Do NOT double list accomplishments, but rather place them in the category you deem most appropriate. Do NOT change the format of the Faculty Record Template.**

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| **Name:** |  | **Date:** |  |

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| **Academic Department:** |  |

**Tenure-Track Faculty Rank** *(Check current rank or rank applying for if initial appointment)*:

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| --- | --- | --- | --- | --- | --- |
|  | Assistant Professor |  | Associate Professor |  | Professor |

**Academic Professional Track (APT) Faculty Rank (Non-Tenure Track)** *(Check current rank or rank applying for if initial appointment)*:

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| --- | --- | --- | --- | --- | --- |
|  | Clinical Assistant Professor |  | Research Associate Professor |  | Adjunct Assistant Professor |
|  | Clinical Associate Professor |  | Research Professor |  | Adjunct Associate Professor |
|  | Clinical Professor |  | Assistant Lecturer |  | Adjunct Professor |
|  | Instructional Assistant Professor |  | Lecturer |  | Visiting Lecturer |
|  | Instructional Associate Professor |  | Senior Associate Professor |  | Visiting Assistant Professor |
|  | Instructional Professor |  | Senior Professor |  | Visiting Associate Professor |
|  | Research Assistant Professor |  | Adjunct Lecturer |  | Visiting Professor |

**Tenure Status** (*Check current tenure status or status applying for if initial appointment*):

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|  | Non-Tenure Track |  | Tenure-Track |  | Tenured |  | Tenure in Title Only |

**Primary Area of Faculty Performance** (*Check one of the following*):

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|  | Teaching |  | Research and/or Other Scholarly, Creative Activities |  | Service |

**Secondary Area of Faculty Performance (If Applicable)** (*Check one of the following*):

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|  | Teaching |  | Research and/or Other Scholarly, Creative Activities |  | Service |

# General Information

## A. Education

List all earned and honorary college degrees that you have received (B.S., M.S., M.D., Ph.D., etc.) and the dates. Give the name of degree, date of degree, field of degree, and institution and location degree awarded for each.

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## B. Postdoctoral Education (Including Residencies and Fellowships)

List the postdoctoral education that you have completed. Give the title of your position (e.g., Postdoctoral Fellow), the beginning and ending dates, the source of funding (e.g. American Heart Association, Texas Affiliate), field, name of mentor, and name of institution and location for each.

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## C. Positions Held

List each position (teaching, administrative, and other) you have held subsequent to completion of your postdoctoral education. Give beginning and ending dates and the institution and location for each position. If you were a member of the graduate faculty at another institution, give the dates of appointment and the name of the institution and location. If you held an academic appointment, give the appropriate dates and the name and location of the institution. If you were tenured at another institution, give the appropriate dates and name and location of the institution. Underline your academic appointments at Texas A&M Health Science Center.

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## D. Honors

List the honors you have received and the dates (for example, Phi Beta Kappa, 1985; American Heart Association Established Investigator, 2001).

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## E. Specialty and Sub-Specialty Board Certifications

List the name of each board or other professional organization by which you have been certified/recertified. Also, give the original date of certification for each and expiration date(s) for each (e.g. American Board of Ophthalmology, 1990, exp. 2010; American Board of Microbiology, 1992, exp. 2010).

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## F. Professional and Scholarly Society Memberships

1. Elected

(e.g., American Physiological Society, 1985; Health Science Communication Association, 1988)

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2. Not Elected

(e.g., American Medical Association, 1980; American Society for Microbiology, 1982)

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# Teaching

## A. Teaching Activities

1. Lectures, small group conferences, laboratories and seminars for professional students, graduate students, residents and fellows

List for each the title of course; number of hours of direct instruction per year; approximate number of students impacted; brief description of course materials developed (slides, handouts, etc); brief summary of your teaching evaluations (if available).

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2. Clinical teaching for professional students, residents and fellows

List for each the topic of instruction/supervision; number of hours of direct instruction or supervision per year; approximate number of students, residents or fellows impacted; brief description of educational materials developed (slides, handouts, etc.).

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**B. Non-Credit Educational Activities**

1. **Continuing Medical Education**

List for each the topic of instruction; number of hours of direct instruction per year; approximate number of professionals impacted; brief description of educational materials developed (slides, handouts, etc.).

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2. Educational activities for the lay public

List for each the topic of instruction; number of hours of direct instruction per year; approximate number of individuals impacted; brief description of educational materials developed (slides, handouts, etc.).

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C. Mentoring and Advising

1. Graduate students

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| Are you a member of the graduate faculty? |  | Yes |  | No |
| If so, Date of Appointment: |  | | | |

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| Are you a member of the graduate faculty at another institution? |  | Yes |  | No |
| If so, list institution and date of Appointment: |  | | | |

List the name of each graduate student for whom you served as a member of the thesis or dissertation committee. Underline the names of students for whom you served as Chairperson. Give the name of each student, the degree earned, the field of the student, the name of the department and institution where the degree was earned, and the date the degree was earned. Asterisk (\*) those students who did not complete writing their dissertation under your supervision. Give each student's current title/position and location (if known).

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1. Postdoctoral fellows, research associates, residents, fellows and visiting scientists

List the name and beginning and ending dates of each person for whom you served as a research advisor or faculty mentor. Give each person's current title/position and location (if known).

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1. Professional students

List the name and beginning and ending dates of each student for whom you served as a research advisor or faculty mentor, and the name of the program (e.g., Medical Student Summer Research Program).

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1. Undergraduate students, high school students and other individuals

List the name, beginning and ending dates, and approximate number of hours/week of each undergraduate student, high school student or other individual for whom you served as a research advisor, and the name of the program (e.g., Prairie View Undergraduate Medical Academy Student). Give the person's current title/position and location (if known).

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## D. Other Teaching Activities

List lectures or Grand Rounds you have given. Underline those you presented at other institutions or at national meetings or symposia; include the topics and dates.

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## E. Enhancement of Teaching Skills

List teaching academy programs, continuing education programs and workshops you have attended and include the dates.

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## F. Education Administration

List courses, clerkships, graduate programs, residency programs and fellowship programs you have directed and include the dates.

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## G. Education Committees

List state, regional and national education committees on which you have served (e.g., residency review committees, National Board of Medical Examiners), the dates of your membership, and any offices you have held (e.g., Secretary).

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## H. Innovations in Education

List new courses, residency programs, fellowship programs, workshops, laboratory exercises and other educational components you have developed and the dates they were initiated.

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## I. Education Awards

List teaching awards you have received and the dates.

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# Research and Scholarship

## A. Summary of Research and Scholarly Activity

Summarize in 200 words or less your most important discoveries and your current scholarly activities or interests including research, contributions to education, and patient care.

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## B. Publications

1. Published articles and case reports

Give the complete citation of each published article or case report for which you are an author or co-author (chronological order, ending with the most recent). **Place an asterisk (\*) before those that received peer review.** Give all of the authors' names exactly as they appear in the article or case report, print your name in **bold** letters and underline the name of the corresponding author (the person who submitted the article). Include the beginning and ending page numbers. Please use the format of the following example:

Lukyanenko V, **I Gyorke,** TF Wiesner, and S Gyorke. (2001). Potentiation of Ca2+ release by cADP-ribose in the heart is mediated by enhanced SR Ca2+ uptake into the sarcoplasmic reticulum. *Circ. Res. 89*, 614-622.

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2. Articles and case reports in press

Use the same format as above, but give the date the article was accepted for publication. **Place an asterisk (\*) before those that received peer review.**

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3. Articles and case reports submitted

Use the same format as above, but give the date the article was submitted for publication. **Place an asterisk (\*) before those that received peer review.**

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4. Books, chapters in books, and monographs

Give the complete citation of each book, chapter in a book, or monograph for which you are an author or co-author (chronological order, ending with the most recent). Give the authors' names exactly as they appear in the literature, print your name in **bold**, and underline the corresponding author. Use the format of the following examples for books and chapters:

**Bresnick, E,** and A Schwartz. (1968). *Functional Dynamics of the Cell,* 482 pp., Academic Press, New York and London. **Niemann, H**. Molecular biology of clostridial neurotoxin. *In:* Alouf , JE and J Freer (eds). (1991). *Sourcebook of Bacterial Protein Toxins,* Academic Press, London, pp. 299-344.

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5. Abstracts

Give the complete citation of each abstract for which you are an author or co-author (chronological order, ending with the most recent). Give the authors' names exactly as they appear in the literature, print your name in **bold**, and underline the presenter's name. Use the same format as that for published articles and case reports.

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6. Exhibits and productions

Describe any exhibits and productions for which you have been responsible (chronological order, ending with the most recent). Indicate which of these have won awards (e.g., the AMA Billings Silver Medal).

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## C. Presentations

**1. Invited**

List the invited research presentations you have given at international or national meetings, symposia, workshops or conferences, and invited research lectures (chronological order, ending with the most recent). Underline those presented at other institutions. Give the title of your presentation, the name of the meeting, symposium, workshop, conference or institution, and the date.

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**2. Non-invited**

List the non-invited research presentations you have given at international or national meetings, symposia, workshops or conferences, and non-invited research lectures (chronological order, ending with the most recent). Underline those presented at other institutions. Give the title of your presentation, the name of the meeting, symposium, workshop, conference or institution, and the date.

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## D. Patents or Commercialization of Research

List the titles, authors and dates of award and/or application of those patents to which you have contributed (e.g., invention disclosures, patent applications pending, licensing of technology or collaboration with other faculty leading to product development/licensing and commercialization).

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## E. Extramural Professional Service

In chronological order under each of the following headings, give the beginning and ending dates for each appointment as a regular or ad hoc member.

1. Editor

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2. Member of editorial boards (e.g., *Circulation Research*)

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3. Member of research grant study sections (e.g., NIH, AHA Western Review Consortium)

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4. Manuscript reviewer for the following journals

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5. Consultant to government agencies, private industry, or other organizations

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6. Officer or committee member of scientific or professional organizations

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## F. Grants and Contracts to Support Scholarly Work

Under the categories listed below, list each grant or contract on which you were a principal investigator or co-investigator (not consultant) obtained to support your current scholarly activities or interests including research, contributions to education, and/or patient care. Include the granting agency, grant number, beginning and ending dates, name of the principal investigator, title of the grant/contract, percent effort, and total direct costs for the duration of the grant. Please use the format of the following example:

NIH R01 HL 34567; 07/01/98 - 06/30/03; John Doe (PI); Bill Smith (CoI) Mechanisms of cardiac arrhythmias; 30% effort; $1,000,000.

1. Current Funded Grants/Contracts

a. National and/or International

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b. State and/or regional

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c. Local

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1. Past Funded Grants/Contracts

a. National and/or international

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b. State and/or regional

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c. Local

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1. Pending Grants/Contracts

Give the date of submission.

a. National and/or international

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b. State and/or regional

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c. Local

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1. Grants/Contracts Submitted, Reviewed BUT Not Funded

Give the priority scores and percentile scores (if available).

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## G. Sponsored Clinical Trials and Drug Studies

Supply the same information and use the same format as above for research grants

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## H. Research and Scholarship Awards

List research awards you have received and dates.

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# Administrative Service

## A. Elected, Appointed or Voluntary Positions

For each of the following categories, list the organizations, task forces, committees or programs on which you have served, the beginning and ending dates of your service, any offices you held, and whether you were elected, appointed or volunteered for that service (e.g. Admissions Committee, 1999-present, appointed).

1. National and International

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2. State and Regional

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3. Institutional (HSC, TAMU or Texas A&M University System)

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4. Component

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5. Department/Unit

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6. Hospital/Clinic

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## B. Recognition

List service awards you have received and the dates.

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## C. Innovation

List organizations, task forces, committees or programs you have initiated and the dates of establishment.

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# Professional/Public Service

## A. Elected, Appointed or Voluntary Positions

For each of the following categories, list the organizations, task forces, committees or programs on which you have served, the beginning and ending dates of your service, any offices you held, and whether you were elected, appointed or volunteered for that position (e.g., Bryan/College Station Chapter, American Heart Association, 1995-present, voluntary).

1. Local

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2. State and Regional

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3. National and International

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## B. Recognition

List public service awards you have received and the dates.

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## C. Innovation

List public organizations, task forces, committees or programs you have initiated (e.g., Temple Task Force for a Smoke-Free Environment) and the dates of establishment.

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# Other Information

Briefly provide any other information that is pertinent to your professional or public activities. This may include items such as your involvement in religious organizations, former or current military experience, and awards or other pertinent information not mentioned above.

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# Certification

I certify that, to the best of my knowledge, the information contained herein is the most current and is true and correct as of the date of my signature.

**Signature of Faculty**  **Date**