

Senior Appointments and Promotions

Nominating Package

Faculty members of the School of Dental Medicine who are candidates for promotions and/or tenure are required to submit to the Senior Appointments and Promotions Committee a package of materials documenting their accomplishments in scholarship and service. This package must be submitted in electronic form, on compact disk. No materials on paper will be accepted. The contents of the Nominating Package are as follows:

Nominating Letter

- Candidate's Track and Apportionment of Time
- Candidate Background
- Qualifications of Candidate
 - Years in Service
 - Educational Background and Training
 - Occupational Background
 - Special Responsibilities at the School of Dental Medicine
 - Honors and Notable Accomplishments
- Teaching
- Research
- Service and Clinical
- Mentoring (If Applicable)
- Results of Internal Review (If Conducted)
- Summary and Recommendation

References

(Including Addresses, Phone Number, Email)

- 3 Internal (UConn Health, Storrs)
- 3 External
- Students, Residents, Mentees

These represent the minimum. Candidates may submit up to 6 names of each type.

Curriculum Vitae

- See Curriculum Vitae Template at end of this document.

Teaching Portfolio

- Syllabuses Developed
- Course Outlines
- Continuing Education Course Outlines
- Guest Lecture Summaries
- Awards, Honors, Commendations for Teaching
- Course Evaluations, if available.
- Letters specific to teaching role and/or quality.

Service

Documents Pertaining to:

- School of Dental Medicine, UConn Health, Storrs Committee Chairmanships and Committee Assignments
- Local, Regional Service (Dental Associations, Regional Societies)
- Professional Organizations – National, International
- Foundation and IRG Service – Grant Reviewer, Committee Chair

Scholarship

- Selected Publications
- Grant Summary Statements
- Awards, Honors for Research

Mentorship

- List of Mentees-last 5 years
- Productivity of Mentees

UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE
Senior Appointments & Promotions Committee

Curriculum Vitae Template

CONTACT INFORMATION

Name
Address
Telephone
Cell Phone
Email

PERSONAL INFORMATION

Date of Birth
Sex

Optional Personal Information:

Marital Status
Spouse's Name
Children

EDUCATION *(Include dates, majors, and details of degrees, training and certification)*

University
Graduate School
Post-Doctoral Training

EMPLOYMENT HISTORY *(List in chronological order, include position details and dates)*

Work History
Academic Positions

PROFESSIONAL QUALIFICATIONS

Certifications and Accreditations
Licensure

PROFESSIONAL MEMBERSHIPS

AWARDS, HONORS

TEACHING ACTIVITIES

- I. **SDM, SOM Undergraduate Teaching**
- II. **SDM, SOM Resident Teaching**
- III. **Graduate School Courses**
- IV. **Continuing Education**

SERVICE ACTIVITIES

- I. **Committee Memberships**
 - A. SDM Positions, Committee Memberships
 - B. Health Center Positions, Committee Memberships
 - C. University Positions, Committee Memberships
 - D. State Positions
 - E. Regional, National, International Positions
- II. **Scientific Reviewing; Editorial; Advisory**
 - A. Study section, grant review panel memberships
 - B. Journal editorships
 - C. Ad hoc journal reviewing
 - D. Participation on Data and Safety Monitoring Board, other advisory positions

PRESENTATIONS and PUBLICATIONS

- A. Invited Addresses
- B. Workshops, Clinics
- C. Conference Presentations
- D. Books
- E. Published Abstracts
- F. Chapters & Non-Peer Reviewed Articles
- G. Peer Reviewed Publications

GRANTS APPLIED FOR

GRANTS RECEIVED *(Including dollar amounts, % effort, and role of candidate on grant, as per NIH Other Support page)*