

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)*