

FLORIDA ATLANTIC UNIVERSITY

Christine E. Lynn College of Nursing

Boca Raton, Florida

APPROVED APRIL 26, 2010

RECOMMENDED TEMPLATE FOR THE CURRICULUM VITAE

(Please include only those that are applicable)

DATE: MONTH, YEAR

NAME and CREDENTIALS

BUSINESS ADDRESS

HOME ADDRESS (optional)

(If Applicable) If you are not a U.S. citizen, please indicate the type of visa you have

Visa type or Permanent Resident status

EDUCATION

[List degree, year, institution, and major (give specialty for Master's Degree).] Latest First – Single space

POSTGRADUATE TRAINING & FELLOWSHIP APPOINTMENTS [Include postdoctoral training--years, institution, sponsor; then post-masters certificates—years, institution] (If Applicable)

Postdoctoral Training Years Institution Sponsor

Post-Masters Certificates Years Institution

MILITARY SERVICE [List years, type of service] (May delete this section, list **ONLY IF APPLICABLE**)

PROFESSIONAL EXPERIENCE - Latest first: List inclusive years, then title, when appropriate whether visiting, tenure-earning, or tenured and place for each position]

A. ACADEMIC POSITIONS

Years Title Academic Institution

B. CLINICAL & ADMINISTRATIVE POSITIONS

Years Title Academic Institution

C. OTHER APPOINTMENTS

Years Title Academic Institution

CERTIFICATION/LICENSURE

Specialty Certification [List inclusive years, type, certifying body]

Years Type Certifying Body

Licensure [List jurisdictions and years, including inactive status]

State/Country Years

HONORS/AWARDS/MEMBERSHIPS IN HONORARY SOCIETIES

Include Visiting Faculty Appointments [If any]

Year Name of Honor/Award/Membership in Honorary Societies or Organizations

RESEARCH

Doctoral Dissertation [Give **DAI** citation. List dissertation supervisor.] (*Optional*)

Funded Research Grants (Past/Present)

[Include grant name & sponsor number, period of award, grant category (see category codes below), role in grant (PI, Co-PI, Co-Inv), % effort, funding source, total direct cost (if total is not known such as for PI on subcontract in multisite project, list grant name and amount of subcontract), comments (e.g., multicenter trial)]

Funded Program Grants (Past/Present) (Educational or Practice)

[Include grant name & sponsor number, period of award, grant category (see category codes below), role in grant, % effort, funding source, total direct cost, comments (e.g. graduate training grant)]
For example: HRSA grants, or Grants from Foundations

Past/Present Research (Not Funded by Grants)**Past/Present Educational or Practice Programs (Not Funded by Grants)****PUBLICATIONS (RESEARCH AND SCHOLARLY WORKS) - Latest first**

[Include only relevant publication categories. List journal publications first. Include all published and in-press manuscripts; for in-press manuscripts, give number of typed, double-spaced pages. Do not include submitted, but not yet accepted, manuscripts.]

JOURNALS

Journal Articles: Research, Peer Reviewed [Print or other media; * indicates data-based]

Journal Articles: Clinical, Other [Peer Reviewed Reviews; Contributions to peer-reviewed clinical research publications, participation cited but not by authorship]

Journal Articles: Non-Peer Reviewed Research/Other

Abstracts [List only past *FIVE YEARS*; * indicates data based, # indicates peer reviewed]

BOOKS

Textbooks and Reference Books (Sole author; editor; co-editor)

Monographs and Manuals [print or other media]

Chapters in books or monographs

Guest Editorials, Book Reviews, Other publications [e.g., letters to the editor, op-ed and newsletter publications]

Alternative Media [List any other non-peer reviewed contributions to alternative communication formats, e.g., instructional audio or video tapes, articles in the lay press, educational material via Internet, etc.] consumer publication and mass media coverage ?

PRESENTATIONS (* indicates **Refereed**, # indicates **Invited**) [Podium/Paper/Poster]. *Past five years or since last personnel action*. List latest presentations first; indicate either Keynote, Plenary, etc].

PATENTS & COPYRIGHTS (if applicable)

CONSULTATION: RESEARCH/EDUCATIONAL/PRACTICE

RECENT LECTURES BY INVITATION, SPEECHES AND WORKSHOPS MEETING/CONFERENCE ORGANIZING ROLES [e.g., indicate role as convener, primary or co-organizer; give date, title, sponsor, location]

MEMBERSHIPS IN PROFESSIONAL & SCIENTIFIC SOCIETIES & OFFICES HELD [List years of membership; indicate years offices held; separate international, national, state & local]

SELECTED PROFESSIONAL ACTIVITIES [List latest activities first. Give inclusive dates, name of organization/sponsor, and your role (e.g., organizer of event); include editorial positions, peer review bodies, expert legal witness service, professional organization activities. *Separate* international, national, state and local]

SERVICE ACTIVITIES AT CHRISTINE E LYNN COLLEGE OF NURSING [first list School of Nursing Committees followed by University Committees]

School of Nursing Committees [List inclusive years, name of committee, and your role (e.g., Chairperson).]

University Committees [List inclusive years, name of committee, and your role (e.g., Chairperson).]

CLINICAL AGENCY ACTIVITIES [include, e.g., leadership roles, special projects completed]

DOCTORAL DISSERTATION COMMITTEES AND POST DOCS MENTORED [List your role (Chair or Member), student name and dissertation title, university and year completed.]

MENTORED PROFESSIONALS [List name, affiliation and rank of mentee, years]

EDUCATIONAL COURSES TAUGHT [List course, level (Doctoral, Masters, Undergraduate), and affiliations if applicable]

Codes for past/present funded research and program grants

R01 – NIH R01

PP – NIH Program Project, Center or Core Grants

FG – Federal Grants – Other (including other individual NIH grants and grants from VA, NSF, DOJ, DOD, AHRQ, DOE, etc.)

CT – Clinical Trials

TG – Training Grants

IG – Industrial Grants (including pharmaceutical)

PG – Private Foundation Grants (including internal Penn grants)

O – Other

Notes:

1. For Program projects, specify whether PI, co-leader or project leader. For center, core and training grants, similarly specify your role.

2. Include any additional, brief information. For clinical trials, for example, specify if multicenter or single center and indicate role of Penn site. Explain any grants in “Other” category.