

**A Guide to Completing the Weill Cornell Medical College *Curriculum vitae*
Form**

**Prepared by the Office of Faculty Affairs
Weill Cornell Medical College, Cornell University**

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INTRODUCTION

Your Weill Cornell Medical College Curriculum Vitae (CV) Form is an important primary document available to you for presenting your credentials to Medical College offices and appointment and promotion committees. On the one hand the CV is a “form” that captures historical and demographic data on you, information that the Medical College requires in order to record and process your faculty or non-faculty academic appointment. On the other hand, in particular for senior faculty appointments, promotions and tenure (associate professor and professor ranks), it provides an opportunity for you to highlight your accomplishments in teaching, clinical care, administration, and research. All new academic appointees – faculty and non-faculty – are required to complete the CV. It is also required for other appointment actions, including but not limited to promotions or changes in title. This document is a reflection of your achievements, and it is advisable to take the preparation and completion of this document very seriously.

Your CV **MUST** be signed by you as it is your testament to the veracity of its contents. If there is non-factual content in this CV form, you may be held liable for presenting false information, which could result in the withdrawal or revocation of your academic appointment.

This guide aims to help you in the preparation of your CV. Please use it as you complete the CV form. Retain the format of the CV form throughout: please do not delete a section if it does not apply to you or you have no information to enter. Rather, you should enter instead Not Applicable or N/A. Also, please do not delete the numbering or lettering of the various sections or titles (e.g. Name, City, etc.). Maintaining your CV in the appropriate format will facilitate review by those who use the document to access the information they need. You may use a font and font size of your choice but exercise common sense in your choice; the form should be easy to read.

The Office of Faculty Affairs is available to help you with your CV and with any other questions or concerns you may have about your Weill Cornell Medical College academic appointment. Feel free to call (212-821-0737) or email us (facultyaffairs@med.cornell.edu). We would appreciate your comments or suggestions for improving this guide. Thank you.

DIRECTIONS

Each item in the CV that requires a response will be underlined. An explanation and guidance will follow the underlined item.

Date of preparation

Often, this item is overlooked and left blank. Please don't make this mistake! If those who need to review your CV do not know how current the information in it is, it may lead to confusion, or a delay in processing.

A. GENERAL INFORMATION

This section contains required and optional information. The responses should be straightforward. Please complete it accurately.

Required Information

Name

Provide your full name, including middle name or initials, and suffixes.

Office address, telephone and fax numbers

This information is vital as it will be used to send you institutional information, such as invitations to convocation in the spring or other correspondence that may be important to you. Please provide accurate and complete information: street, building, suite, room number, etc.; include zip code (or country code).

Home address, home telephone, cell phone, beeper, Email address(s)

Please provide this data accurately and completely. If there is an apartment number or floor associated with your address, please include it. Your home address and telephone number are kept confidential and do not leave the Office of Faculty Affairs (OFA). The OFA uses this information to communicate with you regarding your academic appointment.

Provide a stable, permanent email address if possible. It is becoming more and more likely that communications will be sent to you via email.

Citizenship

This is required information. If you are a visa holder, your appointment is contingent upon maintaining valid visa status. Provide the country of primary citizenship. If it is not the USA, choose either “immigrant visa” (green card) or “non-immigrant visa”. Provide the type of non-immigrant visa, e.g., H1B, J1, F1, B1 etc. If your visa is pending, please state so – “visa pending” or “visa application in process”.

Optional Information

The following information is optional but helpful to the Office of Faculty Affairs and the College.

Date of birth: use MM/DD/YYYY or November 1, 1965

Place of birth: Show City, State, and Country

Marital status: e.g, Single, Married

Spouse’s name:

Children’s names and ages:

Race/Ethnicity

Should you choose to enter Race/Ethnicity please use one or more of the following categories:

Caucasian; African-American; Asian; Native American; Pacific Islander; Latino.

B. EDUCATIONAL BACKGROUND

The information in this section is important! Please pay close attention to details. Provide all the information requested for **academic degrees**. Do not list here licenses, certifications, or other non-academic designations. Also, do not include other types of training for which you received a certificate or other non-academic documentation. Only academic institutions – Colleges, Universities – confer academic degrees - so “academic degree” is well-defined.

Creating and using a table to enter this data, as well as other data in the CV, will make formatting the information easier, and lead to greater clarity.

For Example:

Degree	Institution Name	Institution Location	Dates Attended	Year Attended

Please make sure your table is set up appropriately such that it remains within the margins of the page, and the information is presented clearly.

Degree

Enter the **name(s)** of each **academic degree**, (Bachelor degrees and above only). Often, degree names are abbreviated, such as B.A., M.D., Ph.D., M.B.B.S. This is acceptable but if your degree is unusual or its abbreviation is ambiguous, please provide the full degree name.

Note well: medical degrees vary throughout the world. For example, some countries confer the Bachelor of Medicine degree to physicians (BM), others confer Bachelor of Medicine and Bachelor of Surgery (MBBS) degrees. If you hold a BM, MBBS or a medical degree other than the MD, do not record MD. Record the actual English equivalent name of your degree. This office uses the FAIMER database to verify the name of the degrees offered by Medical Schools throughout the world (www.faimer.org). In New York State it is potentially libelous to state that you have an MD degree when the name of your degree is something else. Under certain conditions in New York State you may have your degree conferred to the MD degree. For more information, contact the New York State Department of Education (518-474-3817, ext. 400).

Institution name and location *Enforce this*

Please enter accurately and completely the full name and location – city, state, country – of each academic institution that conferred your degree(s). Avoid abbreviations. If your degree is a Medical degree, please state the name of the

Medical School, not simply the University. For example, Harvard Medical School versus Harvard University.

As it is not unusual for institutions to change names or designations, please use the current name of the institution. Although the name of the school may have been different when your degree was conferred, if the current name is not shown on the CV, it can be difficult to record your degrees. This information as recorded by the OFA will be used in various College lists, so it is important to be thorough with this information. If we are unable to accurately determine your degree-granting institution, it may be recorded incorrectly.

Dates attended

Please show the date range during which you attended the institution, from beginning to end. At a minimum, please list the beginning and ending years, for example 1990 to 1994. Showing month and year is preferred.

Year awarded

Please show the year your degree was awarded. This is often, but not always the same year as the last year attended.

C. PROFESSIONAL POSITIONS AND EMPLOYMENT

There are four sub-sections to item C – Professional Positions and Employment – as follows.

Post-doctoral training (include residency/fellowships)

<u>Title</u>	<u>Institution name and location</u>	<u>Dates held</u>
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Suggestion: Consider using a Table...

This first subsection asks for postdoctoral training and you should include here internships, residencies, fellowships and postdoctoral or other training received after your doctorate. Please list your postdoctoral training positions in chronological order, include full titles, and the name and location (city, state, country) of the institution where training took place. Please list when the training began and when it ended, e.g., July 1,

2000 – June 30, 2001.

Academic positions (teaching and research)

Title **Institution name and location** **Dates held**

Suggestion: Consider using a Table...

The second subsection asks for academic – teaching and research positions – held at academic institutions: Colleges, Universities and the like. Appropriate for this section are faculty appointments, e.g., Assistant Professor of Medicine, or non-faculty academic appointments, such as Research Scientist. Please do not include hospital or administrative appointments here. These may be entered elsewhere on the CV form. Please include your full title. For example, include the name of the department(s) if part of the title (e.g., Assistant Professor of Biochemistry); the full institution’s name and location (city, state, country); and the inclusive dates you held the position, e.g., July 1, 1999 – June 30, 2005.

Hospital positions (e.g., attending physician)

Title **Institution name and location** **Dates held**

Suggestion: Consider using a Table...

The third subsection asks for hospital positions, such as attending positions - assistant attending, associate attending, or attending physician - or other comparable hospital positions if the name differs at your institution (e.g. consultant, specialist, professional associate, independent health care professional, etc.). Please do not list administrative positions here, such as Director, Vice-President, etc. Please include the full title(s); the full institution’s name and location (city, state, country); and the inclusive dates you held the position, e.g., July 1, 2000 – June 30, 2004.

Other Employment

Title **Institution name and location** **Dates held**

Suggestion: Consider using a Table...

The last sub-section is for any other employment for which you were compensated, full-time or part-time. Please show here positions that are not postdoctoral training; not academic appointments; nor hospital appointments.

2. **Board Certification**

Full Name of Board Certificate # Date (MM/DD/YY)

Suggestion: Consider using a Table...

List the full name of the Certifying Board. Please do not abbreviate or conjoin board names in a case where you have 2 certifications from sub-boards. Show each certification and the conferring Board separately. This will help us record your Board certifications accurately, which in turn will ensure that they are listed correctly on College websites. List the certificate number and the date the certification was issued or last reissued. Please use a full date: Month, Day, and Year. Failure to give a complete date might make it necessary for us to record an approximation.

3. **Malpractice insurance**

Do you have Malpractice Insurance?

Answer: YES or NO; or N/A if it is not relevant.

Name of Provider:

Give the provider's name. Avoid abbreviations.

Premiums paid by: (choose one)

- a. **self** b. **group(name)** c. **institution(name)**

Show who pays your malpractice premiums. Choose one of the three options by marking with a check, a circle or stating the name, as needed (you may delete the other choices for clarity).

E. **PROFESSIONAL MEMBERSHIPS (medical and scientific societies)**

1. **Member/officer Name of Organization Dates held**

Suggestion: Consider using a Table...

For individuals in the early stages of their career there may be relatively few or no entries here. However, for mid-career and senior faculty members, this section is a key place to demonstrate the extent to which you participate in extramural activities as they relate either to service or leadership roles in your particular professional community. This is an important way to document meeting College criteria for appointment or promotion at the upper ranks.

Distinguish the different types of involvement with societies and other professional groups, e.g., as a Member or Officer, which would point to leadership roles.

F. HONORS AND AWARDS

1. Name of award Date awarded

Suggestion: Consider using a Table...

This is another key section for demonstrating one's reputation locally, regionally, nationally and internationally, among peers, students, patients, colleagues, and others. Examples include teaching awards, patents, research awards, best-paper awards, book awards, membership in honor societies, etc. One could also include here entries in *Who's Who*, *Best Of* listings, etc.

G. INSTITUTIONAL/HOSPITAL AFFILIATION

For those in clinical practice who have attending or other professional designations at New York-Presbyterian Hospital and/or at other hospitals, show here your hospital affiliations. For non-clinical individuals, show here your institutional affiliation(s) other than Weill Cornell Medical College. The Institutional/Hospital Affiliation information is important relative to your academic appointment as it may have an impact on the type of appointment you are eligible for. If you have no Hospital or other institutional affiliations, denote this with Not Applicable or N/A.

1. **Primary Hospital Affiliation**

For example: New York-Presbyterian Hospital

2. **Other Hospital Affiliations**

For example: Memorial Hospital, Memorial Sloan-Kettering Cancer Center; Hospital for Special Surgery; etc.

3. **Other Institutional Affiliations**

For Example: National Institutes of Health; Public Health Research Institute, etc.

H. **EMPLOYMENT STATUS**

Because of the WCMC system of appointments on tracks and the relationship of appointment on those tracks to employment status, in particular for faculty members who come to the College through affiliate institutions, it is important for us to ask about employment status.

Provide the name of your current employer. If you are currently unemployed, state so. It is permissible to list Weill Cornell as your employer in cases where employment by the College is anticipated, but do not list Weill Cornell in those cases without qualifying it as “upon approval” or “expected”. Avoid using the name of your mentor or faculty member at the College with whom you may be working. Please do not use abbreviations.

Choose an employment status using the alphabetical letters or simply typing in the status based on the choices (or use another description if one available does not fit). You delete the remaining, inapplicable choices for clarity.

1. **Name of Current Employer(s):**

For example: Weill Cornell Medical College; New York Hospital Queens; etc.

2. **Employment Status (choose one):**

- a. Full-time salaried by Cornell
- b. Full-time salaried at Cornell-affiliated hospital
- c. Part-time salaried at Cornell
- d. Part-time salaried at Cornell-affiliated hospital
- e. Voluntary (self-employed or member of a P.C.)
- f. Other salaried
- g. Other non-salaried

I. **CURRENT AND PAST INSTITUTIONAL RESPONSIBILITIES AND PERCENT EFFORT**

This section is highly important for upper level appointments and promotions. Please take the time to carefully work on your responses to this section. It is with this section that you will be able to communicate to your peers and review committees the breadth and depth of your academic activities at the Medical College and other academic institutions or hospitals.

The four categories – Teaching, Research, Clinical Care, Administration – are those areas of service upon which the criteria for all academic faculty and non-faculty appointments and promotions are based. Here is where you can demonstrate how you meet the criteria for appointment or promotion. Use this section as a place to create a narrative between yourself and reviewers who will be seeking to understand how you meet the criteria for appointment or promotion.

If you have no entry for one or more of these activities, please note it by Not Applicable or N/A.

Suggestion: Consider using a Table for each of the items 1-4 below...

1. **Teaching: (specific teaching functions, courses taught, dates)**

List here the types of teaching you have done, and are currently doing. This may include classes you teach or have taught in classroom settings, didactic lectures, or instruction in team teaching settings. Show your role in multidisciplinary courses or in course development; show your role as mentor or supervisor to medical students, graduate students, fellows and postdoctoral associates. Be sure to include dates of participation in each teaching entry you create; use inclusive dates with a start and end date. Please make sure to include the institution, even if WCMC, where duty is performed.

Use of a Teaching Portfolio is encouraged especially when teaching is a major component of your accomplishments and activities. Include the Portfolio as an attachment and indicate under this heading that a Teaching Portfolio is attached.

2. **Clinical care: (duties, dates)**

Break out your clinical care responsibilities, if applicable, by specific duties, inclusive dates, and institution. Avoid excessive brevity: for example, rather than stating: “Clinic, 2 days per week”, expand upon the nature of the clinic and

your role(s) in the clinic. Provide information about your area of expertise in the clinical setting and where you provide clinical care, how often, for how many patients, etc.

It is understood that in many clinical settings, teaching occurs. Be sure to delineate teaching activities that happen in the clinical setting. If you fail to provide the information that you are teaching during clinical care, it may appear that you are lacking in teaching. In particular for the Clinical and Voluntary tracks, clinical care and teaching are primary activities.

3. **Administrative duties:**

Please include committees, dates, and the locations (i.e. institution) for your administrative duties. The duties listed in this section should be institutional, and not administrative duties related to professional societies, or other extramural activities, which are best listed under Section K. Extramural Professional Responsibilities.

4. **Research:**

Please provide a brief description of your research interests, activities, and career trajectory with dates. IRB protocols (both active and inactive) may be included under this subsection. Please note that the information provided here is a general commentary on your research work, the following section, J. Research Support, is the area to list awarded and pending grants and contracts.

Percent Effort

Please complete the following and answer the accompanying question. A useful way to determine your percent effort is to calculate your time/effort in each area based on a 35/hr week and converting to a percent. If you are new to Weill Cornell, you may use your anticipated effort. If you are part-time at Weill Cornell (Adjunct, Visiting, Courtesy), state your overall effort.

Current Percent Effort (%)

Does the activity involve WMC
students/researchers? (Yes/No)

Teaching

Clinical Care

Administration

Research

TOTAL: 100%

J. RESEARCH SUPPORT

(Summarize past research support and list the following for current extramural and intramural research funding)

Please consider clearly marking past, current, and pending research support, for example, by using headings.

1. Source, \$ amount, and duration of support (dates, formatted MM/YY to MM/YY))
2. Name of Principal Investigator
3. Individual's role in project, including percent (%) effort

K. EXTRAMURAL PROFESSIONAL RESPONSIBILITIES

(e.g., Journal reviewer, NIH study section, Invited Lectures, etc.)

This is a broadly defined category, but can be very useful in demonstrating academic and service engagement outside the site of primary activity. When it is populated with a variety of academic activities such as participation as a journal reviewer, grant review boards, study sections, invited lectures, consultancy, volunteer work, community service, etc., it can help establish one's reputation, a critical criterion for promotion or appointment to upper level ranks.

L. BIBLIOGRAPHY

For recent graduates, and those being appointed to associate positions (Clinical Associate) or trainee positions, there may be few or no entries in the bibliography. If there are no entries, note it by marking the section as "N/A".

For senior level appointments or promotions (associate professor, professor, tenure, university professor), this section of the CV form is critically important.

Please pay extra attention to completing this section carefully. Errors or incomplete information may cause delays, confusion, or other undesirable consequences. Review your entries carefully for completeness according to the example format below. Do not omit pages numbers, dates, journal name, etc. Number the entries, and use bold type for your name so that the placement of your name in the authorship is clear to reviewers.

Notes about types of bibliographic entries:

In subsection # 1 of Bibliography, list peer-reviewed, original research articles or reports in professional peer-reviewed journals. You may parse these entries by refereed or non-refereed. List articles that have been published or are in press only. Do not list submitted or under-review articles – you may create a separate section for these entries. Do not list your abstracts here (see below).

Letters and invited publications to non-peer reviewed journals should be listed under a separate heading. Be careful in listing these and other similar types of publications. Keep in mind the difference between *bona fide* peer-reviewed publications and invited articles, certain types of letters, and other publications that represent scholarship and may appear in peer-reviewed journals but are non-peer-reviewed publications. These should be listed under a separate heading. The College Committee of Review is rigorous in reviewing the bibliography section of the CV form.

Entries should follow standard journal format, listing all authors, complete titles and inclusive pagination.

(E.g., **Doe J, Ford A, Smith J.** *Measuring the activities of daily living.* *N England J Med* 1994; 331:778-84.)

List entries in chronological order within the following categories:

1. Articles in professional peer-reviewed journals - include only articles that have been published or are in press. Articles that are submitted, accepted, or in preparation for publication should not be included here, but we encourage you to create a separate subsection, directly after this, and list them there, clearly identified.
2. Books, book chapters and reviews.

Create separate headings with numbered entries for presentation clarity.

(E.g., *Doe J. Title. New York, NY: Cornell U Press; 1998*)

3. Abstracts (Optional - List 10-20 best or most recent only)

In some cases, such as in the early stages of one's academic career, listing abstracts will show that an individual is involved in scholarly work and as such would be appropriate to list here. In other cases where there is a body of scholarly work spanning several years or decades, the value of listing tens or even hundreds of abstracts is highly questionable. It would be prudent in the latter case to select the most notable abstracts and list them only.

4. Presentations (Not required but may be included. Other than invited lectures. List 10-20 best or most recent only)

It may be worthwhile to list in this section poster presentation or other non-lecture type presentations. However, the same logic used for item #3 should be applied here. If there is a long list of this type of presentation, be highly selective. If, however, most or all of your scholarship or academic engagement with your peers has occurred through this type of venue, then it would be worthwhile to populate the list.

You may consider creating other descriptive subsections here in order to list other types of scholarly work. This could include electronic-only publication, CDs, etc.

Please sign your CV and include the date of signature. At present, it is preferred that you use a wet signature on your paper document (i.e. take pen to paper!). Scanned copies of a wet-signed form are acceptable but only if the scan is of a high quality. Illegible scans or copies will be returned, which could cause processing delays. Verifiable electronic signatures are acceptable.

Date:

Signature:
(invalid if not signed)