Curriculum Vitae

[Title] [Given Name] [Family Name]

**[Professional Title]**

Note: Record level details are generally denoted only once for each section. If there are multiple subsections, please use the same format unless noted otherwise.

# A. Date Curriculum Vitae is Prepared: [Year Month Day]

# B. Biographical Information

Primary Office [Institution]
 [Street Address]
 [City], [Province], [County]
 [Postal Code]
Telephone [Telephone Number]
Cellphone [Cell Phone Number]
Fax [Fax Number]
Email [Email Address]

## 1. EDUCATION

### Degrees

[Presented in reverse chronological order]

[Start – End Dates] [Degree], [Subject/Discipline], [Department], [Institution/Organization], [City], [Province/State], [Country], Supervisor(s): [Supervisor(s)]

### Postgraduate, Research and Specialty Training

[Presented in reverse chronological order]

[Start – End Dates] [Title/Position], [Subject/Discipline], [Department/Program], [Institution/Organization], [City], [Province/State], [Country], Supervisor(s): [Supervisor(s)]

### Qualifications, Certifications and Licenses

[Presented in reverse chronological order]

[Start – End Dates] [Title], [Specialty], [Institution/Organization], [City], [Province/State], [Country], License / Membership #: [License/ Membership Number]

## 2. EMPLOYMENT

### Current Appointments

[Presented in reverse chronological order]

[Start – End Dates] [Title/Position], [Division], [Department,] [Faculty/ School], [Institution/Organization], [City], [Province], [Country].

 *Description.*

### Previous Appointments

#### CLINICAL

[Presented in reverse chronological order]

[Start – End Dates] [Title/Position], [Division], [Department,] [Faculty/ School], [Institution/Organization], [City], [Province], [Country].

 *Description.*

#### CONSULTING

#### HOSPITAL

#### RESEARCH

#### UNIVERSITY

#### UNIVERSITY – CROSS APPOINTMENT

#### UNIVERSITY – RANK

#### WORK INTERRUPTIONS

#### [OTHER POSITION TYPE]

## 3. HONOURS AND CAREER AWARDS

### Distinctions and Research Awards

#### INTERNATIONAL

Received

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Role], [Institution/Organization], [City], [Province/ State], [Country]. ([Award Type , Specialty: [Specialty])

 *Description. Total Amount: [Total Amount] [Currency]*

Nominated

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Role], [Institution/ Organization], [City], [Province/ State], [Country]. ([Award Type], (i.e., Credential, Distinction, or Research Award), Specialty: [Specialty])

 *Description. Total Amount: [Total Amount] [Currency]*

#### NATIONAL

Received

Nominated

#### PROVINCIAL/ REGIONAL

Received

Nominated

#### LOCAL

Received

Nominated

### Teaching Awards

#### INTERNATIONAL

Received

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Role], [Division], [University Department], [Faculty], [Institution/Organization], [City], [Province/ State], [Country]. (Primary Audience, Year/Stage, Specialty: [Specialty])

 *Description. Total Amount: [Total Amount] [Currency]*

Nominated

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Role], [Division], [University Department], [Faculty], [Institution/ Organization], [City], [Province/ State], [Country]. (Primary Audience, Year/Stage, Specialty: [Specialty])

 *Description. Total Amount: [Total Amount] [Currency]*

#### NATIONAL

Received

Nominated

#### PROVINCIAL/ REGIONAL

Received

Nominated

#### LOCAL

Received

Nominated

### Student/Trainee Awards

#### INTERNATIONAL

Received

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Specialty], [Role], Awardee Name: [Student Name]. [Institution/ Organization], [City], [Province/ State], [Country].

 *Description. Total Amount: [Total Amount] [Currency]*

Nominated

[Presented in reverse chronological order]

[Start – End Dates] **[Name of Award]**, [Specialty], [Role], Awardee Name: [Student Name]. [Institution/ Organization], [City], [Province/ State], [Country].

 *Description. Total Amount: [Total Amount] [Currency]*

#### NATIONAL

Received

Nominated

#### PROVINCIAL/ REGIONAL

Received

Nominated

#### LOCAL

Received

Nominated

## 4. PROFESSIONAL AFFILIATIONS AND ACTIVITIES

### Professional Associations

[Presented in reverse chronological order]

[Start – End Dates] **[Role]**, [Association Name], [Membership Number]

### Administrative Activities

#### INTERNATIONAL

[Institution/Organization name]

[Presented in reverse chronological order under individual institutions/organizations]

[Start – End Dates] **[Role]**, [Committee Name], [Faculty], [University Department], [Division], [Primary Audience], [City], [Province], [Canada].

 *Description.*

#### NATIONAL

#### PROVINCIAL / REGIONAL

#### LOCAL

### Peer Review Activities

#### ASSOCIATE OR SECTION EDITING

[Presented in reverse chronological order]

[Role]

[Start – End Dates] [Institution/Organization], [Journal/Section], Number of Reviews: [Number of Reviews]

#### EDITORIAL BOARDS

#### GRANT REVIEWS

#### MANUSCRIPT REVIEWS

#### PRESENTATION REVIEWS

#### [OTHER ACTIVITY TYPE]

### Other Research and Professional Activities

#### RESEARCH PROJECT

[Presented in reverse chronological order]

[Start – End Dates] **[Role]**. [Title]. [Institution/ Organization], [City], [Province], [Country]. Supervisor(s): [Supervisor(s) Name]. Collaborators: [Collaborators Name]

 [*Description*].

#### thesis project

#### [OTHER ACTIVITY TYPE]

# C. Academic Profile

## 1. RESEARCH STATEMENTS

[Presented in reverse chronological order]

[Start – End Dates] [Title/Subject].

 [Description].

 [Impact].

## 2. TEACHING PHILOSOPHY

[Free text field]

## 3. CREATIVE PROFESSIONAL ACTIVITIES STATEMENT

[Introduction of CPA (free text field)]

# D. Research Funding

## Note: Indicate amount of funding that goes directly to your lab/ research program.

## 1. Grants, Contracts and Clinical Trials

### PEER-REVIEWED GRANTS

#### FUNDED

[Presented in reverse chronological order]

[Start – End Dates] **[Role]**. [Name of Grant]. [Funding Source]. [Funding Program Name]. [Grant/Account Number]. Principal Investigator: [Last Name, First Name(s)]. Collaborators: [Name(s)]. [Amount] [Currency]. [[Funding Type]]
*Description*.

#### AWARDED BUT DECLINED

[Presented in reverse chronological order]

[Start – End Dates] **[Role]**. [Name of Grant]. [Funding Source]. [Funding Program Name]. [Grant/Account Number]. Principal Investigator: [Last Name, First Name(s)]. Collaborators: [Name(s)]. [Amount] [Currency]. [[Funding Type]]
*Description*.

### NON-PEER-REVIEWED GRANTS

[Presented in reverse chronological order]

#### FUNDED

#### AWARDED BUT DECLINED

## 2. SALARY SUPPORT AND OTHER FUNDING

### Personal Salary Support[Presented in reverse chronological order]

[Start – End Dates] [Funding Title]. [Funding Source]. [Amount] [Currency]. [City], [Province], [Country]. (Specialty: [Specialty]).

### Trainee Salary Support

[Start – End Dates] [Funding Title]. Trainee Name: [Trainee Name]. [Funding Source]. [Amount] [Currency]. [City], [Province], [Country]. (Specialty: [Specialty]).

### Other Funding

# E. Publications

## Note: Underlined trainee name.

## 1. MOST SIGNIFICANT PUBLICATIONS

[Presented in reverse chronological order]

1. [Author(s) - ***CV holder’s name bolded***]. [Article Title]. [Journal Name]. [Year] [Month] [Day];[Volume]([Issue]):[Page Range]. [Rest of Citation]. Available from: [URL]. [Status - *only if “In Press”*]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

*Most significant publication details*.

## PEER-REVIEWED PUBLICATIONS

### Journal Articles

[Presented in reverse chronological order]

1. [Author(s) - ***CV holder’s name bolded***]. [Article Title]. [Journal Name]. [Year] [Month] [Day];[Volume]([Issue]):[Page Range]. [Rest of Citation]. Available from: [URL]. [Status - *only if “In Press”*]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Case Reports

1. [Author(s) - ***CV holder’s name bolded***]. [Report Title]. [Edition]. [City] (Canada): [Publisher]; [Year] [Month] [Day]. [# of pages] p. [Report #]. [Rest of Citation]. Available from: [URL]. [Status - *only if “In Press”*]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Books

1. [Author(s) - ***CV holder’s name bolded***]. [Book Title]. [Edition]. [Editors], editor(s). [Volume]. [City] ([Country]): [Publisher]; [Year]. [# of pages] p. [Rest of Citation]. Available from: [URL]. [Status - *only if “In Press”*]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Books Edited

[Same citation format as “Books”]

### Book Chapters

1. [Author(s) - ***CV holder’s name bolded***]. [Chapter Title]. In: [Editors], editor(s). [Book Title]. [Edition]. [Volume]. [City] [(Country)]: [Publisher]; [Year]. p. [Page Range]. [Rest of Citation]. Available from: [URL]. [Status - *only if “In Press”*]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Manuals

1. [Author(s) - ***CV holder’s name bolded***]. [Manual Title]. In: [Editors], editor(s). [Name of Journal, Book, etc. where it was published]. [Edition]. [Volume]. [City] [(Country)]: [Publisher]; [Year]. [# of pages] p. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Editorials

[Same citation format as “Journal Articles”]

### Commentaries

[Same citation format as “Journal Articles”]

### Letters to Editor

[Same citation format as “Journal Articles”]

### Monographs

1. [Author(s) - ***CV holder’s name bolded***]. [Title]. [Journal Name]. [Year] [Month] [Day]. [Rest of Citation]. (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Multimedia

[Same citation format as “Monographs”]

### In Preparation

1. [Author(s) - ***CV holder’s name bolded***]. [Paper Title]. [Editors], editor(s). [Year]. [#of pages] p. [Rest of Citation]. Available from: [URL]. (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Clinical Care Guidelines

1. [Contributors - ***CV holder’s name bolded***]. [Title]. [City] (Canada): [Publisher]; [Year] [Month]. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Journal Issues

1. [Author(s) - ***CV holder’s name bolded***]. [Issue Title]. [Journal Name]. [Year] [Month] [Day]; [Volume]([Issue]). [# of pages] p. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Magazine Entries

1. [Author(s) - ***CV holder’s name bolded***]. [Article Title]. [Magazine Name]. [Year] [Month] [Day]; [Volume]([Issue]):[Page Range]. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Newspaper Articles

1. [Author(s) - ***CV holder’s name bolded***]. [Article Title]. [Newspaper name] ([Edition]). [Year] [Month] [Day]; [Section]:[Page Range]. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Online Resources

1. [Author(s) - ***CV holder’s name bolded***]. [Title]. [Editors], editor(s). [City] [(Country)]: [Publisher]; [Year] [Month] [Day]. [Rest of Citation]. Available from: [URL]. Impact Factor [Impact Factor] (Trainee publication, [Trainee Details] - *only if it is a trainee publication*). **[Role]**.

### Other Publications

[Same citation format as “Monographs”]

## 3. NON-PEER-REVIEWED PUBLICATIONS

[Same citation format as Peer-Reviewed Publications]

### Journal Articles

### Case Reports

### Books

### Books Edited

### Book Chapters

### Manuals

### Editorials

### Commentaries

### Letters to Editor

### Monographs

### Multimedia

### In Preparation

### Clinical Care Guidelines

### Journal Issues

### Magazine Entries

### Newspaper Articles

### Online Resources

### Other Publications

## 4. SUBMITTED PUBLICATIONS

[Same citation format as Peer-Reviewed Publications]

### Journal Articles

### Case Reports

### Books

### Books Edited

### Book Chapters

### Manuals

### Editorials

### Commentaries

### Letters to Editor

### Monographs

### Multimedia

### Clinical Care Guidelines

### Journal Issues

### Magazine Entries

### Other Publications

# F. Intellectual Property

**1. Patents**

[Presented in reverse chronological order]

[Date of Issue] **[Title]**. [Status], Filing Date: [Year] [Month]. Patent #: [Patent #], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

**2. Copyrights**

[Date of Issue] **[Title]**. [Status - *Applied or Granted*], Filing Date: [Year] [Month]. Copyright #: [Copyright #], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

**3. Licenses**

[Date of Issue] **[Title]**. [Status - *Applied or Granted*], Filing Date: [Year] [Month]. License #: [License #], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

**4. Disclosures**

[Date of Issue] **[Title]**. [Status - *Applied or Granted*], Filing Date: [Year] [Month]. Disclosure #: [Disclosure #], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

**5. Trademarks**

[Date of Issue] **[Title]**. [Status - *Applied or Granted*], Filing Date: [Year] [Month]. Trademark #: [Trademark #], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

**6. Other**

[Date of Issue] **[Title]**. [Status - *Applied or Granted*], Filing Date: [Year] [Month]. #: [#], [State/Province], Canada. Joint Holder Name(s): [Joint Holder Names].
*[Brief Description]*.

# G. Presentations and Special Lectures

## Note: Underlined trainee name.

## 1. International

**Invited Lectures and Presentations**

[Presented in reverse chronological order]

[Date] **[Presentation Role]**. [Title]. [Organizer]. [City], [State/Province], [Country]. Presenter(s): [Presenter(s)]. [Description/Contribution Value]. Available from: [URL]. (Trainee Presentation - *only if it is a trainee presentation*).

**Presented Abstracts**

[Same format as “Invited Lectures and Presentations”]

**NOTE: Clearly indicate if podium presentation vs poster presentation.**

**Presented and Published Abstracts**

[Date] **[Presentation Role]**. [Title]. [Organizer]. [City], [State/Province], [Country]. Presenter(s): [Presenter(s)]. [Description/Contribution Value]. Available from: [URL]. (Trainee Presentation - *only if it is a trainee presentation*)

*Publication Details:*
[Author(s)]. [Title]. [Journal Name]. [Year] [Month] [Day];[Volume]([Issue]):[Page Range]. [Rest of Citation]. **[Publication Role]**.

**Media Appearances**

[Date] **[Presentation Role]**. [Topic]. Interviewer: [Interviewer]. [Program], [Network]. [City], [State/Province], [Country]. Presenter(s): [Presenter(s)]. [Description/Contribution Value]. End date: [Year] [Month] [Day]. Available from: [URL]. (Trainee Presentation - *only if it is a trainee presentation*).

**Other Presentations**

[Same format as “Invited Lectures and Presentations”]

## 2. National

### Invited Lectures and Presentations

### Presented Abstracts

### Presented and Published Abstracts

**NOTE: Clearly indicate if podium presentation vs poster presentation.**

### Media Appearances

### Other Presentations

## 3. Provincial/ Regional

### Invited Lectures and Presentations

### Presented Abstracts

### Presented and Published Abstracts

### Media Appearances

### Other Presentations

## 4. Local

### Invited Lectures and Presentations

### Presented Abstracts

### Presented and Published Abstracts

### Media Appearances

### Other Presentations

# H. Teaching and Design

*Please see the Teaching and Educational Report for full details.*

# NOTE: Summary of your Teaching and Educational activities (i.e. short summary of what in your TER dossier.)

## 1. Innovations and Development in Teaching and Education

 [Presented in reverse chronological order]

[Start – End Dates] [Title], [Primary Audience], [Faculty], [University Department], [Division], [Institution/ Organization]
*[Description].
[Impact].*

# I. Research Supervision

## 1. Primary or co-supervision

### Multilevel Education

[Presented in reverse chronological order]

[Start – End Dates] **[Role]**, [Year/Stage - *if applicable*]. [Supervisee Name], [Graduate Unit], [Collaborative Program]. Supervisee Position: [Supervisee Position], Supervisee Institution: [Supervisee Institution]. *[Research Project Title]*. *[Group Supervision – if applicable], [Non-thesis Project – if applicable]*. Awards: [Supervisee’s Awards Attained]. Supervisor(s): [Supervisor(s)]. Collaborator(s): [Collaborators]. Completed [year student completed degree - *if applicable*]

### Undergraduate Education

### Graduate Education

### Undergraduate MD

### Postgraduate MD

### Continuing Education

### Faculty Development

### Patient and Public Education

### Postdoctoral Research Fellow (PhD)

### Research Associate

### Clinical Research Fellow (MD)

### Other

## OTHER SUPERVISION

### Multilevel Education

**Secondary Supervisor**

[Presented in reverse chronological order]

[Start – End Dates] **[Year/Stage]**. [Supervisee Name], [Graduate Unit], [Collaborative Program]. Supervisee Position: [Supervisee Position], Supervisee Institution: [Supervisee Institution]. *[Research Project Title]*. *[Group Supervision – if applicable], [Non-thesis Project – if applicable]*. Awards: [Supervisee’s Awards Attained]. Supervisor(s): [Supervisor(s)]. Collaborator(s): [Collaborators]. Completed [year student completed degree - *if applicable*]

**Thesis Committee Member**

**Thesis Examiner**

**Qualifying/Reclass Examiner**

**Other**

### Undergraduate Education

### Graduate Education

### Undergraduate MD

### Postgraduate MD

### Continuing Education

### Faculty Development

### Patient and Public Education

### Postdoctoral Research Fellow (PhD)

### Research Associate

### Clinical Research Fellow (MD)

### Other

# J. Creative Professional Activities

# NOTE: Summary of your CPA activities (i.e. short summary of what in your CPA dossier.)

## 1. Professional Innovation and Creative Excellence[Presented in reverse chronological order]

[Start – End Dates] [Title],
[Description]
[Impact]

## 2. Contributions to the Development of Professional Practices

## 3. Exemplary Professional Practice