

CURRICULUM VITAE
Name, degrees
Organization
Email Address and Phone Number

NOTE: For any fields below that are not currently applicable, state "Not applicable" or "None". Do not delete the field. Delete clarifying instructions in red for final CV.

EDUCATIONAL BACKGROUND: (add institutions as necessary)

<u>Institution</u>	<u>Degrees</u>	<u>Date Conferred</u>
Name of Institution City, State	(Doctorate include if in progress)	
Name of Institution City, State	(Masters)	
Name of Institution City, State	(Bachelor)	
Name of Institution City, State	(Associate)	

DOCTORAL DISSERTATION or PROJECT: (if applicable)

Title of dissertation or project

DISSERTATION/PROJECT DIRECTOR: (if applicable)

Name and credentials of director of dissertation or project

PROFESSIONAL CERTIFICATIONS:

<u>Credential</u>	<u>Accrediting Organization</u>	<u>Date</u>
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MAJOR FIELDS/INTERESTS:

Research: **(summarize current research area of interest)**

Clinical: **(summarize clinical expertise, skill sets, etc.)**

EMPLOYMENT: (add employment fields as necessary)

<u>Employer</u>	<u>Title</u>	<u>Period</u>
Name City, State		
Name City, State		
Name City, State		

HONORS AND AWARDS:

Scholarships and training awards:

Note national awards or training awards here and period of time covered award.

Honor and Scholarly Societies:

List of all associations and/or societies you are a member of and year of initial membership (xxxx).
Includes Sigma Theta Tau.

Recognition/Awards:

List of other recognition or awards you've received and year (or range) when given.

OUTREACH/SERVICE:

Outreach to the Community:

Examples include: speaker at event (title of speech) and year (or range) of event.
Member of professional society in community, role and year (or range) of activity.
Consulting in community. Location and year (or range) of activity.

Intramural: Your current organization service including committee work

Role (Member, chairperson, task force leader, representative, coordinator, etc.), name of committee,
year (or range) of activity

Extramural: Outreach/Service to the Profession

Current Memberships:

Examples include:
American Academy of Nursing,
American Nurses Association
Arizona Nurses Association
International (memberships)
Sigma Theta Tau
Western Institute of Nursing

Professional Consultations - Grants and Research:

Role (year or range of involvement). *Title* (PI: Name). Funded by

Professional Consultations - Review Boards and Journals:

Manuscript Review Panel, *Title of manuscript*
Manuscript Reviewer, *Title of journal*
Grant Reviewer, Type of review, year (or range) of involvement.

Other Extramural Professional Service:

Examples include:

External Reviewer, Name of committee, year (or range) of involvement.

Visiting Scholar (year or range of involvement), Name and location of university.

Research Roundtable speaker, name of organization and/or type of conference, City, State, year (or range) of involvement

Chairperson, name of committee, name of organization, year (or range) of involvement

External Advisory Committee member, name of organization, year (or range) of involvement

Professional Organizational Activity:

Local/State:

Role (member, board of directors, SIG chair, etc.) and name of organization, year (or range) of involvement

Professional Organizational Activity:

National/International:

Role (member, board of directors, SIG chair, etc.) and name of organization, year (or range) of involvement

PUBLICATIONS: (published or Accepted in Chronological Order)

Scholarly Book Chapters: (distinguish scholarly works vs. textbooks)

1. Last name, First & Middle (initials). (xxxx) year of publication. Title of chapter. Reprinted in (editors and *Title of book*), Edition and page numbers listed. City, State: Publisher name.

Refereed Journals:

1. Last name, First & Middle (initials). (xxxx) year of publication. Title of article. *Title of Journal*, Vol(issue), page number. doi: OR http:// (address)

Invited Articles:

1. Last name, First & Middle (initials). (xxxx) year of publication. Title of article. *Title of Journal*, Vol(issue#), page number. doi: OR http:// (address)

Under Review

1. List of authors (Last name, First & Middle (initials). Title of article. Under review at (*Journal Name – if known*)

Epublications and Media:

1. Last name, First & Middle (initials). (xxxx) year of publication. *Title of article*. Retrieved from: http:// (website address noted)

Other Scholarly Work: (Work in progress, including manuscripts in progress)

Last name, First & Middle (initials). (xxxx) year of publication. *Title of article*. Unpublished materials.
Examples could also include:
Media (performances; exhibits; shows; videotapes)

Reports of Funded Research (Examples):

Title of report. Final report to (organization), (xxxx) year of submission.

SCHOLARLY PRESENTATIONS:

Conferences (Total= ___; Published abstracts peer reviewed):

List of authors/presenters (Last name, First & Middle (initials). (xxxx) year of presentation. *Title of presentation*. Name of conference where presentation was given. City, ST. (note award if any given at conference)

Invited Presentations:

List of authors/presenters (Last name, First & Middle (initials). (xxxx) year of presentation. *Title of presentation*. Name of conference where presentation was given. City, ST.

International Presentations (Published abstracts peer-reviewed):

List of authors/presenters (Last name, First & Middle (initials). (xxxx) year of presentation. *Title of presentation*. Name of conference where presentation was given. City, ST, Country.

RESEARCH GRANTS & CONTRACTS: (Awarded) (Note: Federal, State, Industry, Private Foundation)

Extramural:

Role (PI, Co-PI, Co-I, etc.). *Title of grant* (award number). Department/Division/Institute who awarded grant, (xxxx-xxxx) year(s) grant in effect, \$xxx,xxx (total amount of grant).

Intramural:

Role (PI, Co-PI, Co-I, etc.). *Title of grant* (award number). Department/Division/Institute who awarded grant, (xxxx-xxxx) year(s) grant in effect, \$xxx,xxx (total amount of grant).

COMMUNITY OUTREACH GRANTS & CONTRACTS:

Title, *Who awarded (Project name)*. City of Tucson/University of Arizona Foundation, etc., \$xxxxxx (amount awarded), XXXX (year or timeframe awarded)

TEACHING RESPONSIBILTIES AND MENTORING: (if applicable. Note that this is for formal academic settings))

Formal Courses and Independent Studies (taught currently): (Table Format example)

Sem/Year	Course No. & Title (Units)	Class Size	Role	% of Course Responsibility

Additional example: (if Table Format not used – as shown above)

Spring 2017 NURS 620a Title (5) 4 Clinical Supervising Faculty
Spring 2018 NURS 922 DNP Project (2 units) 100 Course Co-chair

Guest Lectures:

Year	Course No. & Title	Topic	Hours	Class Size

Student Advising:

Undergraduate students mentored:

Dates	Name	Program or School

Graduate students mentored:

Dates	Name	Program or School