**INSERT CANDIDATE NAME HERE**

**DOCUMENTATION OF TEACHING FOR PROMOTION**

**Feinberg School of Medicine**

The APT Committee and Dean require this completed form be included with nominations for promotions to the ranks of Assistant Professor, Associate Professor, and Professor on the Investigator, Team Scientist, Clinician-Educator, and HSC/Academic tracks. Only those sections that apply to the activities of the candidate should be completed. Hours noted should reflect the pattern of teaching contributions over the past five years. Highlight and comment on any new courses or new approaches utilized.

|  |
| --- |
| **A. MEDICAL SCHOOL COURSES**  |
| **For each course, provide the following information. (Add rows as needed.)** |
| **Course Title** | **Role** | **Required or Elective?** | **Course Format (Lecture, Conference, Lab, etc.)** | **Contact****Hours** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **B. GRADUATE SCHOOL COURSES** |
| **For each course, provide the following information. (Add rows as needed.)** |
| **Course Title** | **Role** | **Required or Elective?** | **Course Format (Lecture, Conference, Lab, etc.)** | **Contact****Hours** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **C. CONTINUING MEDICAL EDUCATION** |
| **For each CME program in which you taught, provide the following. (Add rows as needed.)** |
| **Course Title** | **Role** | **Course Format (Lecture, Conference, Lab, etc.)** | **# of****Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **D. RESEARCH SUPERVISION** |
| **Provide the following information on each trainee, including medical students, graduate students, postdoctoral fellows, residents, and any others whom you have supervised during the past five years. (Add rows as needed.)** |
| **Name** | **Status of trainee while under candidate’s supervision** | **Dates** | **Did work result in****publication?****(yes or no)** | **Accomplishments of trainee after leaving candidate’s supervision** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **E. CLINICAL TEACHING** |
| **Describe below the nature and frequency of any clinical teaching carried out over the past five years.** |
| Insert response (box will expand as you type) |

|  |
| --- |
| **F. TEACHING AT THE GME LEVEL** |
| **Describe activities distinct from clinical teaching/outside the clinical environment (e.g., didactic, workshop, or simulated-based teaching in structured courses).** |
| Insert response (box will expand as you type) |

|  |
| --- |
| **G. SPECIAL AWARDS** |
| **Describe any special awards, invitations for special lectureships, or significant roles (e.g., chair of educational meeting or session).** |
| Insert response (box will expand as you type) |

|  |
| --- |
| **H. PRIMARY TEACHING ROLE** |
| **Please specify which of the above modes of teaching has been the primary teaching role of the candidate.** |
| Insert response (box will expand as you type) |

|  |
| --- |
| **I. EVIDENCE OF EFFECTIVENESS** |
| **If desired, provide summary data from course evaluations, letters from trainees, or other evidence that addresses the quality of the teaching.** |
| Insert response (box will expand as you type) |

|  |
| --- |
| **J. OTHER** |
| **Document any other teaching accomplishments here.** |
| Insert response (box will expand as you type) |