**INSERT CANDIDATE NAME HERE**

**GLOBAL HEALTH INITIATIVES**

**Feinberg School of Medicine**

This form is optional and may be used by faculty on any career track to record leadership or participation in global health initiatives. When responding to the descriptive, narrative questions, provide succinct and specific responses (typically 1-4 sentences).

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| **GLOBAL HEALTH INITIATIVE #1** |
| **Project Start and End Dates:** |
| **Title of Initiative**:  |
| **Country or Region**:  |
| **Role:** Choose an item. |
| **Participated through Northwestern Program?** [ ]  Yes [ ]  No  |
| **Types of trainees supervised (medical students, residents, fellows, etc), if applicable:**  |
| **Description / Goals** (1-2 line summary of the project goals) |
| Insert response here (box will expand as you type) |
| **Project Team and Your Role / Contributions** |
| Insert response here (box will expand as you type) |
| **Outcomes and Impact:** Highlight observed/measured outcomes relative to the outcome metrics defined for the initiative as well as subsequent impact (if known) such as policy change, procedure change, adoption by other institutions, reorganization, etc. |
| Insert response here (box will expand as you type) |

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| **GLOBAL HEALTH INITIATIVE #2** |
| **Project Start and End Dates:** |
| **Title of Initiative**:  |
| **Country or Region**:  |
| **Role:** Choose an item. |
| **Participated through Northwestern Program?** [ ]  Yes [ ]  No  |
| **Types of trainees supervised (medical students, residents, fellows, etc), if applicable:**  |
| **Description / Goals** (1-2 line summary of the project goals) |
| Insert response here (box will expand as you type) |
| **Project Team and Your Role / Contributions** |
| Insert response here (box will expand as you type) |
| **Outcomes and Impact:** Highlight observed/measured outcomes relative to the outcome metrics defined for the initiative as well as subsequent impact (if known) such as policy change, procedure change, adoption by other institutions, reorganization, etc. |
| Insert response here (box will expand as you type) |

[Copy the above table as many times as necessary.]