

## Faculty Activity Summary Form 2017

Email:

Department:

Rank/Status:

Tenure Status:

Location:

### Part I. Teaching Activities, January 1st 2017 - December 31st 2017

- A. List course numbers, titles, approximate number of students, nature of students (undergraduate, graduate, medical, local physicians, etc.), number of contact hours, and lecture topics).
- B. Research and Clinical Training. List graduate students, medical students, postdoctoral fellows, residents, etc. and describe the nature and period of training for each.
- C. Advising. List names or number of graduate students, medical students, undergraduates, etc., and indicate the nature of your relationship, i.e., advisor, mentor, committee members, etc.
- D. Mentoring: List the names of any faculty, fellows, residents, or others you mentored during the year. Describe the mentoring services you provided and the time spent doing so.
- E. Mentoring Committee: To make sure you and your chair have the same information, please list the members of your mentoring committee (as appointed by or in conjunction with your chair). Please suggest any modifications that might improve the effectiveness of your mentoring committee or mentoring plan.

### Part II. Scholarly Activities

- A. List the peer-reviewed papers published between January 1, 2017 to December 31, 2017. Include manuscripts in press that will be published during 2018.
- B. List reviews and chapters published between January 1, 2017 to December 31, 2017. Include manuscripts in press that will be published during 2018.
- C. List invited seminars and lectures, rounds, presentations, etc. between January 1, 2017 and December 31, 2017. Indicate date, place, audience, title.

### Part III. Funding

- A. List currently funded research, training, or clinical grants on which you are PI. Include agency, grant number, title, start and end dates, direct costs, indirect costs, and percentage effort.
- B. List currently funded research, training, or clinical grants on which you are co-investigator. Include same information as above and indicate the name of the PI.

C. List other sources of research or salary support, if any.

D. List pending research proposals, include the same information as above.

#### Part IV. Service

Indicate service activities between January 1, 2017 and December 31, 2017.

A. Local service for the University or employing hospital affiliate (identify the activity and the amount of time required):

B. Other service provided outside entities. You must disclose all outside activities undertaken between 1/1/17 and 12/31/17, including but not limited to, speaking engagements; consultancies whether for nonprofit, for-profit, or legal agencies; committee work for societies, federal agencies, or foundations; service on any Board of Directors, Scientific Advisory Boards, or other advisory bodies, paid or unpaid; service on editorial boards; service as officer of a national or local professional society; participation in organizing committees or review panels; grants reviews; or any other activities not performed directly for the benefit of Case or its affiliated hospitals.

#### Part V. Intellectual Property Activity

A. Please list any invention disclosures made, patents filed or issued, and licensing agreements entered into.

B. Please list any industry partnerships aimed at collaborative research or product development, including industrially-sponsored research agreements, grant application or activity under the SBIR or STTR programs, and application and/or participation in State commercialization programs such as the BRTT and Wright Center Grants.

#### Part VI. Patient Care

A. Indicate the number of hours, January - December 2017, devoted to patient care.

#### Part VII. Awards and Honors (Please specify)

A. University/School of Medicine

B. Local/State

C. International/National

#### Part VIII. Goals, Objectives, and Assessment.

A. Please describe your professional vision and trajectory for the upcoming 5-year period, 2018-2020. Your plan might include a succinct statement of overall goals, a list of intermediate objectives to be reached along the way, suggestions of additional educational or training experiences to assist you, an enumeration of the products (publications, presentations, grants; courses taught; skills gained, etc) of your work, and a timeline for achieving or completing each step along the way.

B. Copy/Paste or retype your goals for 2017 from last year's form and comment on the extent to which you have met them.

C. Goals for 2018. These should reflect objectives and products, etc., to be reached and produced in the coming year that move toward fulfillment of the 5-year vision described in Section A. Please include a time-line indicating when during the year, e.g., "complete new course planning by the third quarter of the year," or "submit article to JBC by no later than March," by which each is to be achieved. These goals and the extent to which you have achieved them will provide the starting point for your self-assessment and evaluation conducted at the close of 2018.

**Department Chair Comments:**

**Faculty Comments:**

**We certify that all Parts of this Faculty Summary Form were completed:**

**Signature of Faculty & Date**

**Signature of Department Chair & Date**