



**Period of Review** - From: \_\_\_\_\_ To: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Initial Year of Appointment:** \_\_\_\_\_

**Department:** \_\_\_\_\_ **Division/Program:** \_\_\_\_\_

**Academic Rank:** \_\_\_\_\_ **Years at this rank:** \_\_\_\_\_

**Track:** \_\_\_\_\_

**Instructions:** Please list your activities **for the past year** for each area below. Indicate percent effort devoted to each area and rate your performance against your objectives for each category below as:

1. *Achieved beyond expectations*   2. *Achieved*   3. *Not satisfactorily achieved*   4. *NA: Not applicable*

## I. Scholarly Activities (Research, Publications, Invited Presentations, etc.)

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

### Research/Grant Support:

Grants can include Clinical trial/research; NIH grants; Industry grants; Private gains; Multi-center study; Grants Submitted; Patents/Inventions

Funding Agency	Your Role	Total Funds/Indirect Funds	Years

### Mentee Supervision:

List names of mentees and rank, e.g., medical student, resident, fellow

Mentee Name	Mentee Rank	Project	Years

**Publications:**

Type	# 1 <sup>st</sup> Author	# Co-Author	# Senior Author
Abstracts presented or published this year			
Publications appearing this year			
Publications in press			
Books/Chapters published or in press			
Other publications			

**Presentations:**

Type	Regional	National	International
Invited Lectures			
Workshops			
CME/Grand Round			
Other Presentations			

**Faculty Member's Goals and Comments:**

Supervisor Rating: \_\_\_\_\_

Supervisor Comments:

## II. Teaching/Advising

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

List course names, your role, who is taking the course, and years of teaching course

- Role can include Course Organizer, Rotation Director, Curriculum Development, Journal Club Leader, Small Group Discussion Leader, Clinical Supervisor
- Student composition can be undergraduate, graduate, preclinical or medical students; residents or fellows; post-doctoral fellows

### University Teaching:

Course Name	Your Role	Student Composition	Years

### Hospital Teaching:

Course Name	Your Role	Student Composition	Years

### Advising:

Include all types of advising to students, housestaff, post-doctoral fellows, and junior faculty such as thesis advising, career advising, etc.

Mentee Name	Mentee Rank	Project/Area of Mentorship	Years

**Faculty Member's Goals and Comments:**

**Supervisor Rating:** \_\_\_\_\_

**Supervisor Comments:**

### III. Clinical

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

Include all clinical activities such as staff physician/patient care, clinical laboratory research, clinical practice administration, etc.

Clinical Activity	Site of Activity or Setting	Your Role	Years

**Faculty Member's Goals and Comments:**

**Supervisor Rating:** \_\_\_\_\_

**Supervisor Comments:**

## IV. Awards/Honors

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

Include all awards or honors.

Name of Award	Award Organization	Date

**Faculty Member's Goals and Comments:**

**Supervisor Rating:** \_\_\_\_\_

**Supervisor Comments:**

## V. Administration

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

Include all administrative roles such as Division Director, Center Director, Department Chair/Vice Chair, Program/Associate Director, clinical office administration, etc.

Administrative Role	Division/Section	Program	Campus/Hospital

**Faculty Member's Goals and Comments:**

**Supervisor Rating:** \_\_\_\_\_

**Supervisor Comments:**

## VI. Service

**% Effort:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

### Department/Hospital/University Service:

Include all service activities such as involvement with committees, faculty searches, task forces, etc., for the Department, Medical School, or University

Committee Name	Your Role	Date

### Professional Service:

Include service activities such as Journal Editor/Associate/Co-Editor, Journal Reviewer, Society Leadership Role, etc.

Organization	Committee Name	Your Role	Date

### Other Volunteer Service:

Include any other service activities that are not incorporated above

Organization	Committee Name	Your Role	Date

### Faculty Member's Goals and Comments:

**Supervisor Rating:** \_\_\_\_\_

**Supervisor Comments:**



## VII. Diversity, Equity, and Inclusion Activities

**% Effort\*:** \_\_\_\_\_ **Rating:** \_\_\_\_\_

\*Total effort may exceed 100% as DEI work may overlap with other activities

### Describe your DEI work:

Category	Description
Teaching, mentoring, advising	
Research and scholarship	
Clinical work	
Service, professional organizations, committee work	
Other	

### Comments:

## VIII. Professional Development

### Mentoring:

Do you have a mentor?      Yes                  No

Name of Mentor	Frequency of Meetings

- Would you like another mentor?      Yes                  No
- Do you have any specific requests for a mentor match? (*e.g. department, specialty, research*)

**Are there other career development activities not listed in this review that you have done since your last review?** (*e.g. professional society meetings, professional development workshops, etc.*)

### Timeline/criteria for promotion or reappointment:

On track:      Yes                  No

Promotion Timeline/Anticipated Year of Promotional Review:

## STANDARD TIMELINE FOR ASSISTANT PROFESSOR

*BMFA has additional promotional timelines templates upon request*

Academic Year 1	Academic Year 2	Academic Year 3	Academic Year 4	Academic Year 5	Academic Year 6	Academic Year 7	Academic Year 8	Academic Year 9
<b>Assistant Professor – Term 1</b>			<b>Assistant Professor – Term 2</b>			<b>Assistant Professor – Term 3</b>		
							<b>CMFA review</b>	<b>Promotion effective 7/1 (AY start)</b>

**Resources needed (if any) (e.g. scholarly activity, time in rank, services activities, teaching, etc.)**

**Obstacles identified regarding career trajectory (budgetary/administrative/secretarial support, peer/community support, academic support, lab/office space, etc.)**

**Planned leave (e.g. parental leave, sabbatical, medical leave, etc.)**

## IX. Compensation

**Total Compensation:** \$ \_\_\_\_\_

Compensation components

Research	Teaching	Clinical	Administration
\$ _____	\$ _____	\$ _____	\$ _____

**Department's Benchmark Standard:**

AAMC

MGMA

Both

**Faculty's current percentile:** \_\_\_\_\_

**Departmental goal percentile:** \_\_\_\_\_

## X. Optional Areas for Discussion\*

*\*Collaboration goals, networking, career satisfaction, work-life balance, etc.*

### **Career Fit:**

Which professional activities do you find most professionally meaningful? What percent of effort do you spend in that activity? (*e.g. patient care, research, teaching, etc.*)

### **Collaboration with Colleagues:**

Include current and desired collaboration needs

### **Other Topics:**

**Recommended Resources:**

**Faculty Member Comments:**

**Supervisor Comments:**

## XI. Summary Goals

**Summary:**

**Goals for the next five years:**

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**Faculty Member**

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**Date**

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**Supervisor (if applicable)**

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**Date**

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**Department Chair**

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**Date**