



# Polishing Your Portfolio for P&T Clinical & Education

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# Before we begin

- Mute microphone to limit background noise.
- Submit questions at any time via the Chat icon. The Chat icon appears when you mouse over the bottom of the screen.
- If the volume seems too low, check your system volume.
- Technical issues? Log out and log back in.
- Session is being recorded. A link to the recording will be emailed soon.

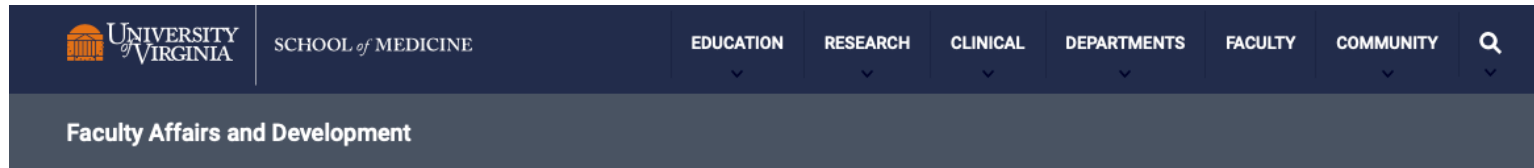
# Topics

- P&T information - Website
- P&T Timeline
- What's in your Portfolio
  - Areas of Excellence: Documentation in the Portfolio
    - Clinical Care
    - Education (Teaching Portfolio)
    - Research
  - Scholarship
  - Formatting your CV for P&T
  - Personal Statement
  - Reputation and Referee Letters
  - Service
- Summary and advice

# Everything you need to know about P&T is on the website:



<https://faculty.med.virginia.edu/facultyaffairs/advancement/pandt/>



## Promotion and Tenure

The Office of Faculty Affairs manages all promotion and tenure actions at the School level for both regular cycle actions and expedited reviews for retention purposes.

The promotion and tenure process begins in March with the dissemination of the list of eligible faculty, and concludes 15 months later with the promotion of all recommended faculty on July 1.

For more information about the P&T process, please contact:

**Sue Weiss**, 434-924-9030 / [sg4na@virginia.edu](mailto:sg4na@virginia.edu)

**Dr. Robert Nakamoto**, SoM Coordinator of Academic Achievement, [rkn3c@virginia.edu](mailto:rkn3c@virginia.edu)

[Collab](#) | [Advancement App](#)

## Menu

### ABOUT

### FACULTY LIFE CYCLE

### FACULTY AFFAIRS

[Annual Review Process And Forms](#)

[Endowed Chairs](#)

[Committees](#)

[Emeritus](#)

[Promotion And Tenure](#)

[P&T Timeline](#)

[Promotion And Tenure Task Force Report](#)

[Current P&T Policy](#)

[Faculty Tracks](#)

[P&T Forms](#)

[P&T Resources](#)

[Frequently Asked Questions](#)

### HONORS AND AWARDS

### POLICIES/GOVERNANCE

### PROFESSIONAL DEVELOPMENT

## Faculty Affairs and Development

### P&T Resources

#### Getting Oriented

[P&T Timeline](#) (updated for 20-21 cycle)

[Current P&T CME Courses](#)

Slides from "[Polishing the Portfolio](#)"

Slides from "[P&T for Junior and New Faculty](#)"

Slides from "[Preparing your P&T CV](#)"

[Guidelines for department P&T committees](#)

#### Building a Portfolio

[Portfolio content guide](#) (updated 18 May 2018)

[CV format guide](#) (updated 19 April 2016)

[Criteria for Selecting Referees](#)

[Job Description Summary](#)

[Sample personal statements](#)

[Sample portfolios](#) (requires eservices password; visit [this page](#) for help)

[Documentation of Excellence: Teaching/Education](#)

### Menu

#### COVID-19 RESOURCES HUB

#### ABOUT

#### FACULTY LIFE CYCLE

#### FACULTY AFFAIRS

[Annual Review Process And Forms](#)

[Endowed Chairs](#)

[Committees](#)

[Emeritus](#)

[Promotion And Tenure](#)

[P&T Timeline](#)

[Promotion And Tenure Task Force Report](#)

[Current P&T Policy](#)

[Faculty Tracks](#)

[P&T Forms](#)

[P&T Resources](#)

[Department Committees](#)

[Personal Statements](#)

[Frequently Asked Questions](#)

#### HONORS AND AWARDS

#### POLICIES/GOVERNANCE

#### PROFESSIONAL DEVELOPMENT

# The Journey: *When things happen*

- Spring –
  - *Because of the Provost's automatic extension of the eligibility period for tenure, no candidates must achieve promotion to Associate Prof, or tenure for July 2021.*
  - *SOM does not change expectations for "early" applications*
- Annual performance review solidifies plan to application.
  - Candidates and department prepare the P&T CV, personal statement, and generate list of potential references for letter requests.
  - **By June 8, 2020** – Department Administrators submit P&T CV, personal statement, and list of potential references to Dean's office.
- Sept – Department Committee review entire portfolio and vote.
- **By Oct 1** – Chairs nominate candidates and portfolios submitted to the Dean's Office.
  - *[Candidates can appeal Chair's decision to Dean's office]*

## The Journey: *When things happen (cont.)*

- Oct–Dec – SOM P&T Committee reviews portfolios.
- (Dec 11) – only *the chairs* of candidates not recommended for promotion/tenure are notified.  
*[Depts have 1 month to appeal SOM Committee recommendation (“must provide new information”)]*
- End of Jan – Dean’s office notifies outcome of appeals.
- Feb 1 – Dean forwards nominations to the Provost.  
*[Candidates have 1 month to appeal Dean’s decision to Provost (“process or substantive grounds”)]*
- Feb–May – Provost P&T Committee reviews.
- June – **Final approval by the President and the BOV.**
- July 1– Promotion or tenure is awarded.



# General Advice

- Seek advice, including members of the P&T Committee
- Include everything that is evidence for *excellence*
  - awards, invited talks, productivity indices, grateful patient letters, trainee letters, teaching evaluations, etc.
- Be aware of your faculty track and the criteria for each level of promotion
- Be certain what you do *fits with your track* and your job description – confer with Division Chief/Chair
  - If you want to argue for excellence in a domain, your % effort in the domain should be sufficient



# Criteria for promotion: tenure-eligible tracks (CE, CI, AI)

- **Key words** = EXCELLENCE and TRAJECTORY
  - **Assistant to Associate** – excellence in one domain (*clinical care, medical education, research*) and local & regional reputation for clinical and teaching (emerging national reputation for research)
  - **Associate to Tenure** – excellence in two domains plus continuing scholarship with a regional and emerging national reputation
  - **Tenured Associate to Professor** – sustained excellence in two domains plus significant sustained scholarship and national & international reputation
  - Exemplary demonstration of ASPIRE values.
- Same criteria apply to non-tenure tracks, but generally excellence is expected in only one domain
- The track criteria are found at:
  - <https://faculty.med.virginia.edu/facultyaffairs/advancement/pandt/faculty-tracks/>

# What's in your Portfolio

Your portfolio is submitted electronically as PDFs

- Nominating letter from:
  - Chair and Division Chief (if applicable)
  - Secondary Dept. Chair (if applicable)
  - Dept. committee letter with their vote tally
- Candidate Information
  - Job description summary
  - Curriculum vitae
  - Personal statement
- Referee Letters (list of 20 possible references)
- Documentation of excellence in 1<sup>o</sup> and 2<sup>o</sup> area(s) of excellence (clinical, research, teaching portfolios)
- Documentation of scholarship
  - 3 publications (pdf files) or books

# AREAS OF EXCELLENCE

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## A. Clinical Care

*Clinical skills, innovations, research and/or programs that are locally and/or regionally distinctive; programs that measurably improve patient outcomes. Recognition through formal awards. Documentation of performance metrics should be provided.*

# Criteria for Clinical Excellence:

- Requires at least 20% time
- Patient care:
  - “Clinical skills, innovations, research and/or programs that are locally and/or regionally distinctive; programs that measurably improve patient outcomes. Recognition through formal awards. Documentation of performance metrics should be provided.”
- Productivity
  - RVU - important to normalize for your % effort and relative to national benchmarks, UHC are the most commonly used.
  - Strive for top 50 percentile.
  - Helpful to include table or graph of RVUs vs year
- Consistent adherence to practice-related standards
- Patient Satisfaction Scores
  - Press Ganey data for prior 5 years in appropriate format.
  - Letters from grateful patients or their families (do not solicit)
  - Awards

# Other Possible Measures

- Specialty-specific outcome measures
  - Examples are mortality rates, readmission rates, case complexity.
- Clinical practice improvement activities
- Scholarly activity applicable to the candidate's clinical activity is expected.
  - This may include peer-reviewed publications, participation in clinical trials, etc.

# AREAS OF EXCELLENCE

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## B. Education

*Excellence in training, teaching, and advising of undergraduate, medical or graduate students, residents, clinical or postdoctoral research fellows, or colleagues; as evidenced by teaching evaluations and recognition through formal awards, election to honorary educational societies, invited lectures and symposia, and participation in workshops, professional society programs and Continuing Medical Education courses.*

# Teaching Portfolio

The Teaching Portfolio is a companion to the CV

Instructions in P&T Resources:

<https://faculty.med.virginia.edu/facultyaffairs/wp-content/blogs.dir/105/files/2015/05/Teaching-portfolio-19April-2013.pdf?r=1>

The Teaching Portfolio has three parts:

- A short introductory statement (one page or less) that summarizes your teaching activities
- A main body that gives detailed information about your contributions as an educator.
- Teaching evaluations



# Teaching Portfolio

- Use the Academy of Distinguished Educator Teaching Portfolio format:
  - Format is found in P&T Resources page, "[Documentation of Excellence: Teaching/Education](https://faculty.med.virginia.edu/facultyaffairs/files/2015/05/Teaching-portfolio-19April-2013.pdf)"  
<https://faculty.med.virginia.edu/facultyaffairs/files/2015/05/Teaching-portfolio-19April-2013.pdf>
  - If over 30 pages,
    - it is helpful to summarize teaching evaluation data
    - highlight selected anecdotal comments by students and trainees
  - Include syllabi only if you created it
    - Class notes, web-based materials, lab manuals, or clinical cases are not necessary. Can be summarized, or the first page shown with details summarized

# Teaching Portfolio Do(s) and Don't(s)

- **Do not** include PowerPoint slides of your lectures unless this is something really novel.
- **Do** include student evaluations, quantification of your performance as compared with other instructors (against the course or department medium)
  - Helpful to average scores or to create a table
- **Ask** the course directors if they are collecting this information and if not tell them it is important for your next promotion.
- Your postdocs, fellows, residents, med and graduate students in the lab are a reflection of your teaching ability.
  - Former lab members can provide letters for teaching portfolio
  - Include current positions of former trainees (outcomes)

# AREAS OF EXCELLENCE

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## C. Research

*Excellence may be achieved as an independent investigator (1); and/or a team/collaborative scientist (2)*

- 1. National/international recognition by peers as premier investigator; continuation of original investigation, as evidenced by sustained external funding.*
- 2. Substantial and critical contributions in team or collaborative science projects (with funded effort on multiple external grants) and development of intellectual property and participation or leadership in clinical trials are also recognized*

# Research Statement

- 4-5 pages, your research as a faculty member
- Address your audience
  - knowledgeable of the biomedical sciences but not an expert in your field
- Refer to your key publications that illustrate the points (not all of them) in the statement.
- **Emphasize:**
  - Progress since the last promotion action.
  - Your important contributions to team science projects or collaborations.
  - Where is the work going and future plans.

# Research Activities

- Grant support (past, present and pending)
- Publications (with the annotations)
- Review activities – journals and study sections
- Presentations at meetings (international and national), and other institutions
  - Posters vs. oral presentations (reviewed and selected abstracts)
  - Indicate whether presentations were invited
  - Workshops – shows you are the expert in the field

# Collaborations in Research

- Collaborations are good (Team Science), but you must demonstrate your own original and scholarly contributions
- If your research is inherently collaborative, important to indicate your roles and contributions:
  - Multi-PI vs Co-I grants
  - Independent publications in your specialty or area of scholarship
  - Indicate clearly your contributions to projects
- If all your research is with a senior colleague:
  - Independent funding
  - Independent publications, or senior/corresponding authorship
  - Independent invitations establishing your own reputation
- Independent referee letters will help establish your reputation in the field.
- Letters from collaborators should emphasize the “unique, invaluable, innovative contributions” to the success of the projects

# SCHOLARSHIP

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## 3 Publications in the portfolio

**In 1-2 sentences tell us why you chose the 3 examples, for example, why is the paper significant and impactful for your field.** This is very helpful for a reviewer who is likely not in the field.

- The emphasis should be on work at UVa, particularly the work since your last promotion.
- High-impact papers are better.
- Your papers, i.e., corresponding/senior author.
- Papers from your laboratory that clearly demonstrate your contributions to the field.
- If example is a book, indicate:
  - Who and how many are using the materials
  - Your contributions if multiple authors
  - Provide 2 copies of book for review. They will be returned.

# Other forms of scholarship

- Invited reviews, reviews, book chapters, books
- Clinical projects, including drug company studies on which you are a co-PI or site PI
- Contributions to society white papers on best practices
- Apps
- Conference presentations, workshops, videos, etc.

# Scholarship of Application

- As an alternative to traditional research, *applying knowledge to solve problems*:
  - a physician may establish a new field or a new school of thinking in clinical medicine,
  - adapt a major application of new knowledge to the clinical setting,
  - develop or improve a diagnostic or therapeutic technique,
  - design or implement a new program of patient care and/or education,
  - develop patient education materials,
  - pursue health services research,
  - create a new and innovative mode of health care delivery.
- *Scholarship of application should result in peer-reviewed publications and presentations at regional or national meetings and other institutions.*

# Evaluating publications

- Peer reviewed publications are the currency
- More weight is given to first- and senior/corresponding author papers
- Must demonstrate independence *or your significant and impactful role in team science projects.*
- Quality is more important than quantity (but numbers of publications are noted)
  - The quality of journals/publishers is an indicator of impact but the quality of the paper is most important
  - We realize Impact Factors are flawed and often used incorrectly.
- Special attention is paid to the papers published at UVa or since the last promotion (helpful to indicate pubs since last promotion action)
  - If you move to UVa from another faculty position, achievements at the prior institution are considered

# C.V.

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See the “CV format guide” on P&T website:  
*P&T Resources /Building a Portfolio*

(Not every category applies to everyone)

# C.V. Pointers

- Content not context
- Be accurate and avoid sloppiness
  - Your C.V. tells us who you are
  - Keep simultaneous “P&T version” of C.V.
    - Much more information than normal
- Check out additional pointers at the AAMC webpage:
  - [https://www.aamc.org/members/gfa/faculty\\_vitae/150036/cv\\_cv\\_tips.html](https://www.aamc.org/members/gfa/faculty_vitae/150036/cv_cv_tips.html)

# Curriculum Vitae - Tips and Strategies

## Tips

- **Font:** sizes - 12-18 point font for name (the largest font size you use); 12-14 point font for headings; 10-12 point font for text; sans-serif fonts read most easily (those lacking flourishes on the letters); pick one font and use it throughout;
- **Format:** be consistent and concise; include a page number, name header, date of last revision on all pages;
- **Don'ts:** include SSN, age, gender, race, religion, political affiliation, marital/parental status, disability or national origin, DEA numbers; explain why you're leaving your present job; include salary history;
- **Proofread** (read backwards) and spell check;
- Use **active voice**, not passive voice;
- **Avoid using the first person** ("I", "my");
- Because we read left to right, avoid placing dates on the left margin to avoid emphasis on the date as opposed to the activity;



# CV Suggestions

- Reverse chronological order
  - Present position is listed first
  - Same for honors
  - Publications can be in chronological order, but reverse is better
- Helpful to distinguish activities that were:
  - Done while at UVA
  - Since last promotion action
  - Especially relevant to publications, invited talks, grants, etc.
- Careful with names, titles and abbreviations
  - Should be stand-alone (avoid acronyms)
  - You want the reviewers to find the correct information
  - Provide short explanations/definitions

# C.V. Subheadings

## Reverse Chronological Order

- Personal Data
- Education
- Post-Graduate Education
- Academic Appointments
- Other Pertinent Employment
- Certification and Licensure
- Honors and Awards
- Professional Affiliations (list years)

## C.V. Subheadings (cont.)

- Areas of Research Interest
  - Be concise
- Current Projects
  - Be concise
- Teaching Activities
  - This need not be as exhaustive as the Teaching Portfolio

# Teaching Activities in the C.V.

- Classroom teaching – give year, course number and # of lectures, % responsibility
- Clinical teaching – give years
- Teaching Activities other than classroom or clinical
  - Grand Rounds, Journal Clubs
  - Committees related to teaching
  - Classes taken to improve teaching skills
  - Development of new curriculum, teaching materials, etc.

## C.V. (cont.)

- Boards, Editorships, List of journals you review for
- Clinical Activities
  - Inpatient
  - Outpatient
- National, State, University, SOM, Department Committees and Councils
  - NIH study sections, Society service, Dept. service, etc.
- Grants and contracts
  - Title, Agency, Grant number, period of funding, \$ amounts for your part of the project, *your role* (PI, co-PI, etc.), and concisely describe your role.

## C.V. (cont.)

- Facilities (applies to laboratory only)
- Personnel currently supervised
- Undergraduate, Master's, Ph.D. and postdoctoral trainees supervised (*We do not want to see every name of every resident your Dept has trained*)
- Papers published
  - Peer-reviewed articles
  - Books, Chapters, Reviews (indicate which are peer-reviewed)
  - Enduring materials (videos, software, websites.)
  - Short Communications (editorials, commentaries, articles)
  - Abstracts (distinguish if abstracts are reviewed and indicate presenter if a platform talk)
    - include abstracts accepted by conferences that were canceled

## How to list journal articles on your C.V. for P&T: citation analysis, journal rankings, and author contribution:

- *You should provide the following information for all papers:*

- (1) # of times cited

- (2) The Impact Factor (IF) of the journal

- (3) The rank of that journal (ranked by IF) in its field

The ISI "Web of Science" website from HSC Library Homepage (NOT Google - #'s will be different), can be used to get the citations to any of your published papers and the journal IFs and ranking

For help, contact Health Sciences Library Research & Data Services, [hsl-rdas@virginia.edu](mailto:hsl-rdas@virginia.edu)

- (4) If you are neither the first author nor the corresponding author, state your contributions to the paper

➤ Use other indices at your discretion (H-index, Altmetrics, etc.)



### Examples of publication citations:

47. Mahoney ST, Strassle PD, **Schroen AT**, Agans RP, Turner PL, Meyer AA, Freischlag JA, Brownstein MR. Survey of the US surgeon workforce: practice characteristics, job satisfaction, and reasons for leaving surgery. *J. Amer. Coll. Surg.* 2020, 230(3):2832-93. DOI: 10.1016/j.jamcollsurg.2019.12.003

Cited 0 times, IF = 4.45, Rank 13 of 205 in SURGERY journals

Dr. Schroen contributed to study design, survey design, data interpretation, and manuscript preparation.

46. Meneveau MO, Mehaffey JH, Turrentine FE, Shilling AM, Showalter SL, **Schroen AT\***. Patient and personnel factors affect operating room start times. *Surgery* 2020, 167(2):390-395. PMCID: PMC6993132

Cited 0 times, IF = 3.476, Rank 34 of 205 in SURGERY journals

45. Chow PI\*, Showalter SL, Gerber MS, Kennedy E, Brenin DR, **Schroen AT**, Mohr DC, Lattie EG, Cohn WF. Use of mental health apps by breast cancer patients and their caregivers in the United States: protocol for a pilot pre-post study. *JMIR Res. Protocols* 2019, 8(1):e11452. PMCID: PMC6682292

Cited 0 times, IF = NA

Dr. Schroen contributed to patient recruitment and manuscript editing.

44. Hassinger TE, Showalter TN, **Schroen AT**, Brenin DR, Berger AC, Libby B, Showalter SL\*. Utility of CT imaging in a novel form of high-dose-rate intraoperative breast radiation therapy. *J. Med. Imaging Radiat. Oncol.* 2018, 62(6):835-840. PMCID: PMC6283680

Cited 3 times, IF = 1.2, Rank 106 of 129 in RADIOLOGY, NUCLEAR MEDICINE & MEDICAL IMAGING journals

Dr. Schroen contributed to clinical trial recruitment, patient care, data collection, and manuscript editing.

- Underline co-authors who are your trainees
- Identify the senior/corresponding author with an asterisk
- When you are neither the first nor the corresponding author, briefly state your contribution to the paper.

## C.V. (cont.)

- Technology Transfer Activity
  - Inventions
  - Patents applied for and awarded
  - Registered copyright material
  - Trademarks for university-owned intellectual properties
  - License agreements
- Invited Lectures and Symposia
  - Distinguish from meetings attended or submitted abstracts.
  - Include invited talks that were canceled due to travel restrictions, or delivered remotely
- Community Outreach

# PERSONAL STATEMENT

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## Personal Statement or *Tell us your story*

- Use **active voice**, not passive voice.
- Try to limit this to one page, maximum two
- Think about the audience. This document will be read by a range of clinicians/scientists.
- Cover the highpoints, don't go into too much detail on any one point.
- How do you define yourself? Start with the most important part of your job and end with a short summary.
- See examples on P&T website, under *Resources for Faculty/ Building Your Portfolio*

# REPUTATION & REFEREE LETTERS

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# Indicators of Regional/ National/ International Reputation

- Service on a study section or grant review panel of a regional or national agency
- Membership on editorial boards of major journals
- Invited reviews and articles
- Invited talks at regional/national/ international symposia and at other institutions; visiting professorships
- Officer, chair, or member of a committee of regional or national professional or scientific society
- *Your reference letters are also important indicators of reputation*

## Referee Letters

- Candidate and Chair make list of up to 20 potential referees
- At least 7 must be “independent external” (recommend more)
  - Cannot be former advisor/mentor, institutional colleague, or collaborator
  - *Dean’s office must receive at least 3 for committee consideration*
- Rest are combination of internal and external
- You will not know who sends and does not send letters
- *You may ask if they are willing to write a letter no later than early June. Do not provide with any promotion materials.*

Questions asked of each referee:

Have you had any prior work or collaborative history with the candidate?

If you have had a prior work or collaborative history with the candidate, please describe it briefly.

*Do you feel the candidate would be awarded advancement on an equivalent rank/track at your own institution?*



# Referees: Collaborative or Team Science

- **Referees' letters:** Your personal statement can guide referees on your participation in team science
  - Include a description of your roles
- **Chair's letter** should include considerable detail outlining collaborations of the interdisciplinary science program.

# Requirement for service.

- Contribution in service to the department, School of Medicine, Health System, University, and/or to professional boards and organizations.

# What do I need to get promoted or tenured?

- There is **no** specification of # of papers or grant \$ required for promotion or tenure
  - [there is a requirement for continued funding at a national (NIH or equivalent) level for research tracks].
- Demonstrating the ability to carry out and lead scholarly activities independently is important.
- If you participate in Team Science, you must document your significant and impactful roles in the projects.

## Before you submit your portfolio, you are encouraged to consult P&T Committee members

*We want you to understand the P&T guidelines, know the criteria for P&T for your particular track, and learn how to construct your best possible portfolio.*

### Current P&T Committee Members

Jeff Smith, Chair, Biochem Mol Genetics

William Brady, Vice Chair, Em. Medicine

Rasheed Balogun, DOM

Christopher Gaskin, Radiology

Julia Iezzoni, Pathology

Kim Kelly, BME

Bradley Kesser, Otolaryngology

Carol Manning, Neurology

Rachel Moon, Pediatrics

Bettina Winckler, Cell Biology

Thomas Cropley, Dermatology

Maryellen Gusic, MedEd

Wendy Novicoff, PHS

# Other Able Consultants

## *Veterans of the SOM P&T Committee*

Stuart Berr, Radiology  
Ken Brayman, Surgery  
John Bushweller, Physiology  
Jim Casanova, Cell Biology  
Zygmunt Derewenda, Physiology  
Linda Duska, Ob/Gyn  
Brent French, BME  
Adam Goldfarb, Pathology  
Lou Hammarskjold, Microbiology  
Jennifer Harvey, Radiology  
Fern Hauck, Fam Med  
Norbert Leitinger, Pharmacology  
Paul Matherne, Pediatrics  
Edward Nemergut, Anesthesiology  
Vicky Norwood, Pediatrics  
Mark Okusa, Medicine  
Kim Penberthy, Psych & NBS  
Joann Pinkerton, OB/GYN  
BJ Purow, Neurology  
Frank Shen, Orthopaedic Surgery  
Lois Shepherd, PHS  
Elizabeth Warren, Psych & NBS  
Zhiyi Zuo, Anesthesiology

Susan Pollart, Senior Associate Dean  
Bob Nakamoto, P&T Coordinator  
Ellen Beverly, Dir Faculty Affairs  
Susan Weiss, Faculty Advancement  
Administrator

# Summary

- It's not as intimidating as you may think
- Work with your Chair and Dept. If they do a good job, there should be a 100% “pass rate”
- Don't pass us a sloppy or quickly done portfolio
  - Please make the portfolio accessible and do not use too many acronyms and abbreviations
- Check out the website for the criteria, timeline, formatting and instructions - READ and BELIEVE the information
- Not everyone will fill in every line of the standardized C.V.
  - Promotion decision is qualitative – not points for each activity/triumph

# Summary (Cont'd)

- First thing is to get your C.V. prepared, write your personal statement and generate the list of referees.
  - Pay careful attention to the independent "at-arm's length" references
- Start now to collect teaching and clinical evaluations, if you haven't started already.
  - If the course did not have formal evaluations, ask the course director to get anecdotal comments from students
- Feel free to contact any of us for advice, answers, issues
- P&T Committee members in your department or with whom you work will recuse themselves and not be in the room during discussion.  
Don't be afraid to ask their advice and help
- Most applicants are successful (~95%)