

Faculty of Dentistry Office of the Dean 350 - 2194 Health Sciences Mall Vancouver, BC V6T 1Z3

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THE UNIVERSITY OF BRITISH COLUMBIA

SUMMARY OF CURRICULUM VITAE FOR FACULTY RECORDS

Date completed:

1. BIOGRAPHICAL DATA

Salutatio	n:		Legal nar	ne (Last, First):			
Preferred name:							
Preferred pronouns:							
Rank:							
Department:							
Faculty:	Denti	ntistry					
Citizenship:				Date of	Date of birth (day/month/year):		
Social Insurance Number:							
(Required if you have been offered a position with remuneration)							
Home Address							
Phone:			Email:				
CDSBC/CDHBC Registration No.:							

2. EDUCATION

a. Undergraduate (degree(s) received, where and year):

b. Special Professional (e.g. Internships, Residencies, Special Board Qualifications):

c. Graduate (degree(s) received, where and year):



d. Titles of theses written or presented for graduate degrees (indicate degree, name, and title of main supervisor for each):

e. Academic awards and distinctions (prior to final degree):

3. PROFESSIONAL ACTIVITIES

a. Memberships in professional and learned societies (including any offices held, committee memberships, etc.):

b. Academic or professional awards and distinctions:

c. Professional service (consultancies, professional committees, commissions, visiting professorships, invited lectureships, etc.):

d. Other public service:

4. RESEARCH AND PROFESSIONAL RELATED SCHOLARLY AND CREATIVE ACTIVITIES

(areas of special interest and activity in discipline)