**Wake Forest School of Medicine (WFSM) Women in Medicine and Science (WIMS)**

**Early Career Development Program for Women**

**Application Form**

This form should be accompanied by both a current CV and letter addressing specific questions (indicated in the program application materials) and a letter of support from your Department Chair/Section Chief. Complete applications should be submitted to Natalie Barrett via email at [nbarrett@wakehealth.edu](mailto:nbarrett@wakehealth.edu), by October 1, 2018.

This application is about your current career. Please complete it thoughtfully and do not delegate the process.



**First Name:**  Click here to enter text. **Last Name:** Click here to enter text. **Degree:** Enter text here.

**Select your current academic rank** (note: Associate and Full Professors are not eligible for this Program)

Instructor  Assistant Professor  APP

**In what year were you appointed to this rank?** (at current or prior institution) Click here to enter text.

**Name of Institution** (e.g. WFBMC, UNCG, etc): ­­­­­­­­­­­­­­Click here to enter text.

**Primary Academic Department** (e.g. Internal Medicine, Anthropology, etc): ­­­­­­­­­­­­­­Click here to enter text.

**Approximately when will you apply for promotion?** (e.g. next year; in three years) Please keep in mind that you apply in September of one year for promotion to take effect in July of the following year: Click here to enter text.

**Have you ever attended a multi-day professional development course or seminar?**

Yes (please briefly describe the focus of the course/seminar)  No

Click here to enter text.

**Institutional Responsibilities:** Using an FTE model in the table below, please describe your present institutional roles and responsibilities. Enter “0” for any areas of responsibility that do not apply to your position. Please be clear and concise.

|  |  |  |
| --- | --- | --- |
| **Area of Responsibility** | **% Effort** | **Description of Effort** |
| Administrative | Enter % % | Click here to enter text. |
| Clinical | Enter % % | Click here to enter text. |
| Education | Enter % % | Click here to enter text. |
| Research | Enter % % | Click here to enter text. |
| Other | Enter % % | Click here to enter text. |
| Total: | Enter % % |  |

**Which academic track are you on?** (The listing below is applicable to WFSM faculty appointments. If you are applying from outside WFSM, please include your track under *other* if it does not fit the categories listed. “*Other” should not be used by WFSM faculty applicants.*)

Tenure

Research Scholar (formerly Research Contingent)

Educator Scholar (formerly Basic Science Educator; Educator Specialist)

Clinician Scholar (formerly Clinician; Clinician Scientist; Clinician Educator)

Clinician Expert (new track; service, reputation, scholarship)

Unsure

Other (please describe): Click here to enter text.

**I have reserved the dates of this Program on my calendar and am committed to attending all sessions.**  Yes  No