RAK Medical & Health Sciences University, CV Summary

|  |  |  |  |
| --- | --- | --- | --- |
| Name(as in passport) |  | | |
| Applied for- Job position |  | | |
| Present Monthly Salary(UAE Dirhams) |  | Requested Monthly Salary(UAE Dirhams) |  |

1. **EDUCATIONAL QUALIFICATIONS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of the degree** | **Major/**  **Specialization** | **Duration (Years)** | **Year of completion** | **Full Time/Part Time/Online/On Campus/Distance** | **University** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **TEACHING AND ACADEMIC EXPERIENCE (Latest on top):**

**Total- \_\_\_\_\_ Years**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Designation** | **College &**  **University** | **Dates** | | **Subjects/Courses Taught(UG/Grad./PG)** |
| **From** | **To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **CLINICAL EXPERIENCE (If Any) (Latest on top):**

**Total- \_\_\_\_\_ Years**

|  |  |  |  |
| --- | --- | --- | --- |
| **Designation** | **Hospital** | **Dates** | |
| **From** | **To** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. ADMINISTRATIVE EXPERIENCE (If Any):
2. **RESEARCH EXPERIENCES AND PUBLICATIONS**
3. Number of research projects completed:
4. Number of publications in Scopus/ Web of sciences/PubMed indexed journals in last five years:
5. Number of publications in other journals in last five years:
6. Number of research projects supervised:
7. Number of postgraduate students guided:
8. Number of doctoral students guided:

--------------------------------------------------------------------------------------------------------------------------------------

A. RESEARCH INTERESTS, SKILLS AND EXPERIENCE

B. PUBLICATIONS/BOOKS/BOOK CHAPTERS/PEER-REVIEWED JOURNAL ARTICLES/CONTRIBUTION TO EDITED VOLS. EQUIV. TO PEER-REVIEWED

JOURNALS ETC.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.No | Title of the publication | Journal | Indexed? (Yes/No) | PubMed/Scopus/ Web of Science/Other |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

C. SUPERVISION OF STUDENT RESEARCH/ PROJECTS/ MASTERS /PH. D.

|  |  |  |  |
| --- | --- | --- | --- |
| S.No | Category | Institution | Year |
| 1 | Student Research /Projects |  |  |
|  |  |
|  |  |
| 2 | Masters Theses |  |  |
|  |  |
|  |  |
| 3 | Doctoral Theses |  |  |
|  |  |
|  |  |

6. AWARDS, GRANTS AND FELLOWSHIPS

|  |  |  |  |
| --- | --- | --- | --- |
| S.No | Category | Granting Organization | Year in which Received |
| 1 | Grants (Research / others) |  |  |
|  |  |
|  |  |
| 2 | Awards |  |  |
|  |  |
|  |  |
| 3 | Fellowships |  |  |
|  |  |
|  |  |

7. SERVICE TO PROFESSION/PROFESSIONAL CONTRIBUTIONS, ACTIVITIES AND SKILLS (eg. Affiliations/Memberships/Committees/Licenses/Certifications etc.)

|  |  |  |  |
| --- | --- | --- | --- |
| S.No | Category | Organization | Year in which Received /Joined |
| 1 | Affiliations/Memberships |  |  |
|  |  |
|  |  |
| 2 | Membership of Committees |  |  |
|  |  |
|  |  |
| 3 | Certifications |  |  |
|  |  |
|  |  |
| 4 | Licenses |  |  |
|  |  |

1. OTHER PERSONAL DETAILS

Date of Birth :

Address for communication :

Contact Number Mobile :

Residence :

Email ID :

Nationality: Passport Number & “valid till” date:

9. REFERENCES (AT LEAST TWO) WITH E-MAIL ID AND CONTACT NUMBER

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.No | Name of the Referee | Designation -Institution | Mobile Number | E-mail |
| 1 |  |  |  |  |
| 2 |  |  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (SIGNATURE)

\*\* Information may be provided as applicable. If any of the item is not relevant for a particular position, candidate may mention “Not Applicable (N.A)”