**First Name Last Name**

**School at Pace, Department**

**Pace University**

[if a section doesn’t apply to you, delete it]

**Contact Information**

Home Mailing Address:

Pace Email Address:

Work/Home Phone number:

**Education (Post-secondary degrees)**

* Year, Degree Received

**Academic Appointments**

* Year – Year, Title/Position, work done

**Other Professional Experience**

* Year – Year, Position or work done

**Professional Licensures & Certifications**

* Year, Professional License or Certificate Name

# TEACHING

**Courses Taught**

[include these details in bullet form- Name Title (include Prefix and Course Number), Semester Year first developed, Number of semesters taught, Brief description]

**Courses Created**

[include these details in bullet form - Name Title (include Prefix and Course Number), Semester Year first developed, Number of semesters taught, Brief description]

**Students Mentored and/or Student Collaborators**

**Graduate Students**

* Student Name, Date, Brief Description:

**Undergraduate Students**

* Student Name, Date, Brief Description:

**Course Evaluations**

[Display the information below for all courses taught the last 5 years, each course should start on a new row]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Semester Year** | **Prefix & Number** | **Enrollment** | **Avg. Rating** | **Course Title** |
| Spring 2020 | PHYS |  |  | Introduction to Astronomy |
| Spring 2020 | PHYS |  |  | Electricity and Magnetism |
| Spring 2020 | PHYS |  |  | Methods of Mathematical Physics |

# SERVICE, LEADERSHIP AND PROFESSIONAL DEVELOPMENT

**Internal Service or Leadership**

**University Level**

* Month Year – Month Year, Committee/Organization name, your role

**School Level**

* Month Year – Month Year, Committee/Organization name, your role

**Department Level**

* Month Year – Month Year, Committee/Organization name, your role

**Other Internal Service**

* Month Year – Month Year, Committee/Organization name, your role

**External Service or Leadership**

**International/National**

* Month Year – Month Year, Professional Service committee name, role

**Regional/State/Local**

* Month Year – Month Year, Professional Service committee name, role

**Professional Development** (career development opportunities you have pursued)

* Month Year – Month Year,Professional Development event name, your role

**Memberships**

* Month Year – Month Year, Membership organization

**Awards and Nominations**

* Month Year, Organization, Title of Award