

BEST MENTOR IN HEALTH RESEARCH AWARD (Nominee must have a minimum of 5 years of research *mentoring* work)

Curriculum Vitae (CV) of the Nominee

Latest ID picture

1. Name of nominee		
(Family)	(First Name)	(Middle Initial)
2. Employment name		
3. Present Job Position		
4. Employment address		
5. Contact Details:		
5.1. Telephone number (Office)	5	5.2. Fax No.
5.3. Telephone number (Residence)		5.4. Fax No.
5.5. Mobile Number		
5.6. Email Address		

6. Research involvement in the last 5 years

<u>6.A. Research Guidance</u> 6.1. As Adviser/Mentor

Name of Mentee/Advisee	Title of Project/Research	Type of Research (ex. Thesis, dissertation, institutional research, etc.)	Status (completed, on-going, and other relevant information, ex. the advisee/mentee is a recipient of the thesis award, etc.)

• in a separate sheet describe the mentoring work done including the contact details of the mentees/advisees

6.B. Track Record in Research

6.2 <u>Publications</u> - As Main Author/Contributor of a research publication

(peer reviewed)

6.2.1. Locally Published (peer reviewed)

Research Title	Date of Publication	Name of Publication

*copies of abstracts must be attached

6.2.2. Internationally Published (peer reviewed)

Research Title	Date of Publication	Name of Publication

*copies of abstracts must be attached

6.3. Publications - As Co-author of a research publication

6.3.1. Locally Published (peer reviewed)

Research Title	Date of Publication	Name of Publication

*copies of abstracts must be attached

6.3.2. Internationally Published (peer reviewed)

Research Title	Date of Publication	Name of Publication

*copies of abstracts must be attached

6.4. <u>Awards Received</u> - As Main Author/Principal and Co-principal Investigator

6.4.1. of locally funded research

Research/Project Title	Award Received	Award Giving Body	Date Received

*Sample program, photocopies of Certificate of Recognition and pictures (scanned copies) must be attached and copies of abstracts/executive summaries of the above projects must be attached

6.4.2. of internationally funded research

Research/Project Title	Duration	Funding Agency

* Sample program, photocopies of Certificate of Recognition and pictures (scanned copies) must be attached copies of abstracts/executive summaries of the above projects must be attached

6.5. <u>Awards Received</u> as Co-author/Member Research Team

6.5.1. of locally funded research

Research/Project Title	Duration	Funding Agency

*copies of abstracts/executive summaries of the above projects must be attached

6.5.2. of internationally funded research

Research/Project Title	Duration	Funding Agency

*copies of abstracts/executive summaries of the above projects must be attached

6.6 Papers presented

6.6.1. local conference, workshop (oral or poster)

Research/Project Title	Duration	Funding Agency

*copies of abstracts/executive summaries of the above projects must be attached

6.6.2. International conference, workshop (oral or poster)

Research/Project Title	Duration	Funding Agency

*copies of abstracts/executive summaries of the above projects must be attached

6.7 Completed Researches (but not yet published) during the last 5 years

Research/Project Title	Duration	Funding Agency

7. Dedication in Promoting Research

7.1. As Professor/Adviser/Panel Reactor/Critic

Subjects Taught	Name of Institution	Trainees (ex. undergraduate level, graduate level, etc., pls. Indicate)	Date (semester, School year)

*necessary documents may be attached

7.2. As Research Advocate

Research Advocacy	Purpose	Date	Type of Involvement (as organizer, resource person, etc., please indicate)	Audience/ Participants

* Sample program may be attached

7.3. As Reviewer of Journal Article/Editor/Member of editorial board/team

Title of Article	Name of Journal	Date Published

*Sample article may be attached

7.4 As Member of Professional Organization/Network				
Participants/Members	Type of	Status		
	Involvement			
	0	Participants/Members Type of		

7.4 As Member of Professional Organization/Network

*Sample document and pictures must be attached (scanned documents/pictures are acceptable)

7.5.As Trainer/Resource Person/Lecturer

Торіс	Name of Organizer	Participants of the Training Program (ex. faculty members, research directors, etc. , please describe)	Date and Duration of the Training	Venue

*copies of invitation/program, pictures (scanned copies are acceptable), training module must be attached

7.6. Others (as Research Manager/Director, Coordinator, Evaluator, Monitor). Please indicate the activities/type of involvement.

Type and Scope of Involvement	Participants/ Members	Type of Involvement	Date/Duration of Involvement

*necessary documents may be attached

8. Contribution towards a supportive research environment

- 8.1. Providing research opportunities as organizer/initiator of program, project, policy; as organizer/initiator/member of team for workshops, conferences, training courses
- 8.2 Providing research opportunities as director/chair/administrator for research; as study group leader; as research team leader

9. References (with permission)

7.1. Mentees/Auvisees (at least five)				
Name of Mentee/Advisee	Company/School Affiliation	Company/School Address	Contact Details	

9.1. Mentees/Advisees (at least five)

* with accomplished recommendation forms (in sealed envelope) attached *as well as a separate narrative description of the nominee's contribution to the success of each in research.*

9.2. Other References (at least 3)

Name	Company/School Affiliation	Company/School Address	Contact Details

*with recommendation letters in a sealed envelope attached.

This is to certify that the information given in this CV is true and correct.

Name and Signature of the Nominee Date of Submission _____

Submit the accomplished CV with the latest ID picture and the required documents not later than (deadline of submission) to the regional consortium secretariat. (Please refer to the attached paper for list of addresses).