



**Review Sheet for
Clinical Instructor Appointment**
(for CUCH Chief Residents and Fellows)

Department: _____

Name: _____

Current Position: **Chief Resident** **Fellow**

Proposed Title(s): Clinical Instructor of _____
(Department Name)

Please list any service activities:

Please list any research or scholarship you have done:

Please list any other accomplishments (honors, awards, etc. if applicable):