

Application for Initial Clinical Appointment

Department of Orthopaedics

NAME:

DATE:

SIN Number:

Date of Birth:

MAILING ADDRESS:

SEEKING INITIAL APPOINTMENT FOR:

Clinical Instructor

Clinical Assistant Professor

Clinical Associate Professor

Professor

HOSPITAL OR COMMUNITY AGENCY AFFILIATION:

SPONSORING DIVISION HEAD:

Letter of support from sponsoring division, hospital or agency is attached

REASON FOR SEEKING CLINICAL APPOINTMENT:

As outlined in the document “University of British Columbia, Faculty of Medicine, Academic Ranks Appointment, Re-Appointment and Promotion for Clinical Faculty”, please attach a letter addressing your proposed roles in:

- 1 Undergraduate teaching
- 2 Postgraduate teaching

- 3 Administration
- 4 Research
- 5 The demonstration of “Clinical Excellence”

Curriculum Vitae

Current CV on UBC format is enclosed (call Vicky @ 822-7314 for a formatted disc)

Please submit your completed package to:

**Clinical Faculty Appointments/Re-Appointments & Promotions
Committee**

UBC Department of Orthopaedics

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