**Structured Summary**

* *The structured summary should serve as an overview or summation of your teaching activities. The structured summary should be able to stand alone without reference to CV etc.*
* *It should provide sufficient information about the quantity, quality, and breadth of your teaching activities.*
* *You can delete or move the sections around as applicable to your individual teaching activities, highlighting your biggest activities first*
* *Maximum page limit for the structured summary is* ***6 pages****. Minimum font size is* ***11.***
* ***Please review the instructions, structured summary example and FAQs prior to filling this out****.*
* **\*\*\*please delete all text in italics prior to submission\*\*\***

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| **Your name, Title, Department, Section:** |
| **Your clinical and academic responsibilities at BCM, in brief:**  |

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| **List of teaching and evaluation activities*****Write your structured summary so that it concisely portrays the quality, quantity, and breadth of your contribution in the given category.*** |
| **Non-didactic Teaching** |
| **Year(s) Involved** | **Description of Teaching Activities** | **Number and Type of Learner**  | **Teaching Hours/Year and Total Hours**  | **Evidence of Quality**  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Mentoring/Advising** |
| **Year(s) Involved** | **Description of Mentoring Activities**  | **Number and Level of Mentee** | **Mentoring Hours/Year and Total Hours** | **Evidence of Quality**  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Didactic Teaching (Lecture Based)** |
| **Years Involved** | **Course Name or Description of Activity** | **Number and Type of Learner (s)** | **Preparation and Contact Hours/Year and Total Hours** | **Evidence of Quality**  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Small/Large Group Facilitation** |
| **Year(s) Involved** | **Course Name or Description of Activity** | **Number and Type of Learner (s)** | **Preparation and Contact Hours/Year and Total Hours**  | **Evidence of Quality**  |
|  |  |  |  |  |
| **Online teaching as part of an online distance education course (***not COVID-19 virtual teaching)* |
| **Year(s) Involved** | **Description of Activity**  | **Number and Type of Learner (s)** | **Preparation and Contact Hours/Year and Total Hours** | **Evidence of Quality**  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Other**  |
| **Year(s) Involved** | **Description of Activity** | **Number and Type of Learner** *(if applicable)* | **Hours/Year and Total Hours** | **Evidence of Quality**  |
|  |  |  |  |  |
|  |  |  |  |  |

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| **Discussion of Breadth** |
| ***In this section, discuss how your activities represent breadth appropriate to this category—for example, different populations of learners, teaching modalities, locations of teaching activities, etc.)*** |