**UNIVERSITY OF TORONTO**

Creative Professional Activity Report

[Title] [Given Name] [Family Name]

**[Professional Title]**

# 1: Introduction

[Introduction of CPA]

# 2: Professional Innovation and Creative Excellence

## 1. [CPA TITLE]

([Start – End Dates])

Description: [Description].

Impact: [Impact].

### Documentation:

**Note: Below are samples of all activities that could be attached to a CPA title. Include only activities directly related to this CPA title.**

#### *a) Degrees*

|  |  |
| --- | --- |
| [Start – End Dates] | [Degree], [Subject/Discipline], [Department], [Institution/Organization], [City], [Province/State], [Country]. Supervisor(s): [Supervisor]. |
|  |  |

#### *b) Postgraduate, Research and Specialty Training*

|  |  |
| --- | --- |
| [Start – End Dates] | [Title/Position], [Subject/Discipline], [Department/Program] [Institution/Organization], [City], [Province/State], [Country]. Supervisor(s): [Supervisor]. |
|  |  |

#### *c) Qualifications, Certifications and Licenses*

|  |  |
| --- | --- |
| [Start – End Dates] | [Title], [Specialty], [Institution/Organization], [City], [Province/State], [Country], License / Membership #: [License / Membership #]. |
|  |  |

#### *d) Professional Associations*

|  |  |
| --- | --- |
| [Start – End Dates] | **[Role]**, [Association Name], [Licence/ Membership #]. |
|  |  |

#### *e) Positions Held and Leadership Experience*

|  |  |
| --- | --- |
| *[Type]* | |
| [Start – End Dates] | **[Title/Position]**. [Faculty], [Department], [Division], [Institution/Organization], [City], [Province/State], [Country]. [*Description]*. |
|  |  |

#### *f) Honours and Career Awards*

|  |  |
| --- | --- |
| *[Award Status]* | |
| [Start – End Dates] | **[Award Name]**, [Faculty], [University Department], [Division], [Institution/Organization], [City], [Province/State], [Country]. ([Award Type], Specialty: [Specialty]. [Educational Level], [Year/Stage]) Awardee Name: [Student Name]. Role: [Role] Total Amount: [Total Amount] [Currency].  *[Description of Award].* |
|  |  |

#### *g) Other Noteworthy Activities*

|  |  |
| --- | --- |
| [Start – End Dates] | Type: [Type]. Audience: [Audience]. [City], [Province/State], [Country]. *[Description].* Results / Evaluation: [Results/Evaluation]Description. Results / Evaluation: Results |
|  |  |

#### *h) Patents and Copyrights*

|  |  |
| --- | --- |
| [Date of Issue] | **[Title]**. [Type], [Status]. (Patent or Copyright ) #: [Patent/Copyright #], [Country], Joint Holder Names: [Joint Holder Names]. *[Brief Description]*. |
|  |  |

#### *i) Grants, Contracts and Clinical Trials*

|  |  |
| --- | --- |
| *[Grant Status]* | |
| [Start – End Dates] | **[Role]**. [Title]. [Funding Source], [Funding Program Name], [Grant and/or Account #]. PI: [Principal Investigator]. Collaborators: [Collaborators]. ([Funding Type]). Total Amount: [Total Grant Amount] [Currency]. *[Description].* |
|  |  |

#### *j) Salary Support and Other Funding*

|  |  |
| --- | --- |
| *[Funding Type]* | |
| [Start – End Dates] | **[Funding Title]**, Trainee Name: [Student Name], [Funding Source], [City], [Province/State], [Country]. Specialty: [Specialty]. Total Amount: [Total Amount] [Currency]. |
|  |  |

#### *k) Publications*

|  |
| --- |
| *[Publication Type]* |
| **[Role]**. [Authors]. [Title]. [Rest of Citation]. [Publication Status]. Impact Factor: [Journal Impact Factor]. [Trainee Publication]. [Trainee Details].  *[Most Significant Publication]. [Most Significant Publication Details].* |
|  |

#### *l) Presentations*

|  |  |
| --- | --- |
| *[Geographical Scope]* | |
| [Date] | **[Role]**. [Presentation Type]. [Title]. [Host], [City], [Province/State], [Country]. Presenter(s): [Presenters]. [Rest of Citation]. ([Public Presentation] [Presentation by Trainee]) Teaching Evaluation Score: [Teaching Evaluation Score] *Evaluation Details: [Evaluation Details]* |
|  |  |

#### *m) Peer Review Activities*

|  |  |
| --- | --- |
| *[Activity Type]* | |
| [Start – End Dates] | **[Role]**. [Institution/Organization], [Journal/Section], Number of Reviews: [Number of Reviews] |
|  |  |

#### *n) Other Research and Professional Activities*

|  |  |
| --- | --- |
| *[Activity Type]* | |
| [Start – End Dates] | **[Role]**. [Contribution Area]. [Title]. [Institution/Organization], [City], [province/State], [Country]. Supervisor(s): [Supervisor]. Collaborator(s): [Collaborators]. |
|  |  |

#### *o) Teaching*

|  |  |
| --- | --- |
| *[Activity Type]* | |
| [Start – End Dates] | [Activity Title], [Educational Level], [Year/Stage], [Faculty], [University Department], [Division]. Location of Teaching: [Location of Teaching]. *[Activity Description].* Total Hours: [Total Hours] Number of Students: [Number of Students]  Teaching Evaluation Score: [Teaching Evaluation Score] *Evaluation Details: [Evaluation Details]* |
|  |  |

#### *p) Clinical Supervision*

|  |  |
| --- | --- |
| *[Education Level]* | |
| [Start – End Dates] | [Type of Supervision] Supervision. [Role]. [Year/Stage], [Faculty], [University Department], [Division]. Location of Teaching: [Location of Teaching]. *[Activity Description].* Student Name(s): [Student Names (Optional)] Number of Students: [Number of Students] Unit: [No. of Units] X [Type of Units] Total Hours: [Total Hours]  Teaching Evaluation Score: [Teaching Evaluation Score] *Evaluation Details: [Evaluation Details]* |
|  |  |

#### *q) Research Supervision*

|  |  |
| --- | --- |
| *[Educational Level]* | |
| [Start – End Dates] | **[Role]**, [Faculty], [University Department], [Division]. Student Details: [Student Name], Student's Current Position: [Student Current Position], Student's Current Institution: [Student’s Current Institution]  Degree: [Year/Stage].  Research Project: [Research Project Title] Awards: [Student’s Awards Attained] Collaborators: [Collaborators] Completed: [Year Completed]  *[Description]* |
|  |  |

#### *r) Mentorship*

|  |  |
| --- | --- |
| *[Education Level]* | |
| [Start – End Dates] | [Type of Mentee/Preceptorship], [Mentee Name], [Institution of Mentee], [Mentee Title / Position], [Year/Stage]. [Faculty], [University Department], [Division]. ([Formal], No. of Encounters per Year: [No. of Encounters per Year], Total Hours: [Total Hours]) *[Mentor Purpose / Responsibilities].* |
|  |  |

#### *s) Innovations and Development in Teaching and Education*

|  |  |
| --- | --- |
| *[Primary Audience]* | |
| [Start – End Dates] | [Title].  [Faculty], [University Department], [Division], [Institution/Organization].  *[Description].*  *[Impact].*  Total Hours: [Total Hours] |
|  |  |

#### *t) Aggregate Teaching Evaluations*

|  |  |
| --- | --- |
| *[Educational Level]* | |
| [Start – End Dates] | [Source]. [Faculty], [University Department], [Division]. Teaching Evaluation Score (Individual Mean): [Teaching Effectiveness Score (Individual Mean)] City Wide Mean: [City Wide Mean] Hospital Mean: [Hospital Mean] Division Mean: [Division Mean] Quintile: [Quintile] *Evaluation Details: [Student Comments]* |
|  |  |

#### *u) Administrative Activities*

|  |  |
| --- | --- |
| *[Institution/Organization]* | |
| [Start – End Dates] | **[Role],** [Committee Name], [Faculty], [Department], [Division]. [City], [Province/State], [Country]. *[Description]*. Total Hours: [Hours] |
|  |  |

### Supplementary Documentation:

[Supplementary Documentation].

*Note: Any additional documentation can be included here such as email content.*

## 2. [Other Title]

*Note: See CPA Title.*

# 3: Contributions to the Development of Professional Practices

*Note: See Professional Innovation and Creative Excellence.*

# 4: Exemplary Professional Practice

*Note: See Professional Innovation and Creative Excellence.*