**University of Pittsburgh Schools of the Health Sciences**

**Annual Postdoctoral Progress Self-Assessment Form**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME: | | Last, First | | | | | | |
| SCHOOL: | | | Choose School | | DEPARTMENT: | | Enter department name | |
| DATE OF APPOINTMENT: | | | | Click here to enter a date. | EMPLOYMENT CLASSIFICATION: | | | Choose One. |
| YEAR: | Choose a year, or type here for other. | | | | DATE OF PLAN: | Click here to enter a date. | | |

**1. Research Accomplishments**

A. Studies, Investigations and/or Projects

List all research activities with level of participation and progress

|  |
| --- |
| Click here to enter text. |

1. New Technical Skills

|  |
| --- |
| Click here to enter text. |

1. Grant Applications/Fellowships/Collaborations/Patents/Honors/Awards

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| --- |
| Click here to enter text. |

**Self-Ranking for Research Accomplishments:\***  **Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

|  |
| --- |
| Click here to enter text. |

**2. Publication Record**

NOTE:Abstracts and poster presentations should be recorded under Presentation Experience

1. Refereed Articles/Peer Reviewed

Published or in press (list complete citation)

|  |
| --- |
| Click here to enter text. |

1. Review/Chapters/Abstracts

Published or in press (list complete citation)

|  |
| --- |
| Click here to enter text. |

C. Other Publications/Honors/Awards

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| --- |
| Click here to enter text. |

**Self-Ranking for Publication Record:\*  Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

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| Click here to enter text. |

**3. Presentation Experience**

A. University of Pittsburgh

|  |
| --- |
| Click here to enter text. |

B. National Meetings and Other Honors/Awards

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| Click here to enter text. |

**Self-Ranking for Presentation Experience:\*  Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

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| Click here to enter text. |

**4. Professional Development**

1. Seminars/Workshops/Retreats/Courses

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| --- |
| Click here to enter text. |

B. Responsible Conduct of Research Plan

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| Click here to enter text. |

C. Journal Clubs

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| --- |
| Click here to enter text. |

D. Professional Memberships

|  |
| --- |
| Click here to enter text. |

E. University or Community Service, Student Advising or Mentoring

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| --- |
| Click here to enter text. |

1. Mentoring Plan (list 3 mentors, specify frequency of meetings, and notes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Mentor’s Name** | | **Department** | **Email** |
| 1. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| Notes: | Click here to enter text. | | |
|  | | | | |
| 2. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| Notes: | Click here to enter text. | | |
|  | | | | |
| 3. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| Notes: | Click here to enter text. | | |

**Self-Ranking for Professional Development:\*  Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

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| Click here to enter text. |

**5. Customized Career Criteria Relative to Career Goal**

*Identify any additional experiences specifically contributing to Career Development Plan*

1. Specify: Click here to enter text.

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| --- |
| Click here to enter text. |

B. Specify: Click here to enter text.

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| Click here to enter text. |

C. Specify: Click here to enter text.

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| Click here to enter text. |

**Self-Ranking for Customized Career Criteria:\*  Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

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| Click here to enter text. |

**6. Research Independence Plan (if applicable)**

*Identify any additional experiences specifically contributing to Research Independence Plan*

1. Specify: Click here to enter text.

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| Click here to enter text. |

B. Specify: Click here to enter text.

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| Click here to enter text. |

C. Specify: Click here to enter text.

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| Click here to enter text. |

**Self-Ranking for Research Independence Criteria:\*  Exceeded Goals**  **Met Goals**  **Needs Improvement**

*\* Identify any assets contributing to your progress or obstacles that may have prevented you from achieving additional progress:*

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| Click here to enter text. |

**Overall Self-Ranking:  Exceeded Goals**  **Met Goals**  **Needs Improvement**

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| Click here to enter text. |