

# Resident Portfolio

**Name:**

**Faculty Advisor:**

Application	In File	Not Applicable
ERAS Application / Photo	x	
Curriculum Vitae	x	
Personal Statement	x	
Dean's Letter	x	
Academic Transcripts	x	
Letters of Recommendations	x	
USMLE / COMLEX I & II scores	x	
ECFMG Certificate	-	NA
Employment Contract		

J-1 Visa	-	NA
----------	---	----

Dates of Training	Start Date	End Date
PL-1		
PL-2		
PL-3		
PL-4		

Certifications	Expiration	Expiration	Expiration
Medical Training Permit			
BLS			
ACLS			
PALS			
NRP			
USMLE-III			

<b>Intern Case Conference</b>	<i>Date &amp; Topic:</i>
-------------------------------	--------------------------

<b>Research Presentation</b>	<i>Date &amp; Topic:</i>
------------------------------	--------------------------

<b>Senior Grand Round</b>	<i>Date &amp; Topic:</i>
---------------------------	--------------------------

<b>Committees</b>	

<b>Quality Improvement Projects</b>	

<b>Bi-Annual Evaluations</b>	<i>PL-1</i>
	<i>PL-2</i>
	<i>PL-3</i>
	<i>PL-4</i>

<b>Continuity Clinic Evaluations</b>	<i>PL-1</i>
	<i>PL-2</i>
	<i>PL-3</i>
	<i>PL-4</i>

<b>In-Training Exam Scores</b>	<i>PL-1</i>
	<i>PL-2</i>
	<i>PL-3</i>
	<i>PL-4</i>

