**PERSONAL SUMMARY** Enter a short paragraph about yourself.

**CAREER INTENTIONS/OBJECTIVES** Enter a small paragraph explaining your career objectives.

**CURRENT REGISTRATION** Enter your student ID/medical registration number.

**RESIDENCY/VISA STATUS** Enter your residency status and current visa status.

**ACADEMIC QUALIFICATIONS SCHOOL / COLLEGE NAME - Study date (i.e. 2003 – 2008)**

**UNIVERSITY NAME - Study dates**

* Primary medical degree
* Date awarded
* University
* Language of instruction
* Date awarded
* Institution
* Language of instruction

**PRACTICING HISTORY** Enter details (beginning with current employment)

Date of employment (month and year) – end date  
Faculty name and location – city, state, country  
Position title  
Responsibilities

*(You should provide a continuous work history beginning with Internship and including rotations. Any gaps in employment should be accounted for. Consider including undergraduate experience)*

Date of employment (month and year) – end date  
Faculty name and location – city, state, country

Position title  
Responsibilities

Add others as required

**ACADEMIC HONORS AND AWARDS** Enter details here.

**INVOLVEMENT WITH AUDITS AND** Enter details here.

**QUALITY IMPROVEMENT**

**TEACHING AND RESEARCH** Enter details here.

**PUBLICATIONS** Enter details here.

**PROFESSIONAL DEVELOPMENT** Enter details here.

[CONFERENCES AND WORKSHOPS

ATTENDED]

**EXTRACURRICULAR ACTIVITIES** Enter details here.

**PERSONAL INTERESTS** Enter details here.

**Referees -** Please note that a comprehensive CV for the purposes of applying for a job will include referee contact details. However for an intern or Postgraduate Year 2+ (TMO) application in South Australia, through SA Health the following is applicable:

* Intern application: Three Referees are required will be contacted.
* Postgraduate Year 2+ (TMO) Application: Referee details will be collected as part of the   
  online application system and do not need to be duplicated in your CV.

**REFERENCES** Medical Professional Name

Hospital Medical Centre

Address

Professional title

Telephone Number

Email address

Medical Professional Name

Hospital Medical Centre

Address

Professional title

Telephone Number

Email address

Medical Professional Name

Hospital Medical Centre

Address

Professional title

Telephone Number

Email address