**Academic Position Description for Adjunct Clinical Appointment**

**Faculty Member Name:** Click or tap here to enter text.

**Hospital / Organization Name:** Click or tap here to enter text.

**General Description:** A faculty member engaged in academic activities for **less than 20%** of professional time, including teaching during patient care.

**Type of Academic Position Description (select one that applies):**

|  |  |  |
| --- | --- | --- |
|  | Clinician Teacher | Major time commitment to clinical activities with some participation in teaching activities. |
|  | Clinician Administrator | Major time commitment to senior (executive) administrative responsibilities related to academic and clinical programs which occupy at least 50% of professional time. |

**Time Distribution (must add up to 100%)**

|  |  |
| --- | --- |
| **Type of Activity:** | **Time Distribution** |
| Clinical Activity | Click or tap here to enter percentage (if applicable). |
| Research Activity | Click or tap here to enter percentage (if applicable). |
| Teaching Activity | Click or tap here to enter percentage (if applicable). |
| Administrative Activity | Click or tap here to enter percentage (if applicable). |

**Activity Descriptions (provide brief descriptions)**

**Clinical Activities**

Click or tap here to enter brief description of your clinical activities.

**Teaching Activities**

Click or tap here to enter a brief description of your teaching activities.

**Reviews and Reports**

**Annual Academic Review:** The faculty member is required to participate in the annual reappointment process by submitting a summary of academic activities undertaken during the past academic year.

**Reporting Relationship**: The faculty member will report to the Chair of Laboratory Medicine and Pathobiology, Temerty Faculty of Medicine, University of Toronto and to the Hospital Chief/ Hospital Administrative Leader. The Department Chair and Hospital Chief are available to discuss the career development of the faculty member.

**Signatures**

|  |  |  |  |
| --- | --- | --- | --- |
| Faculty Member | Enter Faculty Member name here | Faculty Member sign here. | Enter date here |
|  | Name | Signature | Date |
|  |  |  |  |
| Hospital Chief / Division Director | Enter Chief / Director name here | Hospital Chief / Division Director sign here. | Enter date here |
|  | Name | Signature | Date |
|  |  |  |  |
| University Department Chair | Enter Chair name here | Department Chair sign here | Enter date here |
|  | Name | Signature | Date |