Professor of Sports and Exercise Medicine (Open Rank: W1-Tenure-Track-W3, W2-Tenure-Track-W3 or W3) at the Faculty of Sport Science

Basic data					
Surname, first name, title					
Date and place of birth					
Gender	☐ male ☐ female ☐ divers				
Nationality					
Home address					
Private telephone/e-mail					
Work address					
Severe disability	Yes ☐ ; %		No ☐		
Current position	Full Professor ☐	Associate Professor ☐	Assistant Professor ☐	Research Assistant ☐	Other ☐

Academic career				
University studies Period, subject, university	Month/year	Subject		University
Degrees Month/year, type of degree, subject, university	Month/year	Completion	Subject	University
Licence to practice medicine, if applicable Month/year, place	Monat/Jahr	Medical Chamber		
Doctorate Month/year, doctoral degree, university	Month/year	Doctoral degree/grade		University
Habilitation (if applicable) Month/year, subject, university, venia legendi/teaching qualification	Month/year	Subject	University	Special feature, if applicable
or junior professorship (if applicable) Month/year, with details of interim evaluation)	Month/year	Description	University	Interim evaluation?
Additional academic achievements according to § 36, 4 HG NRW* **Month/year, type and location** *This includes in particular - Specialist recognition - Medical management functions - Further medical training - Professorships - List placements - Other medical qualifications	Month/year	Description		Institution/University

Current position

Type and title, place of employment				
Starting date				
Research area and focus				
Number of supervised theses completed	Bachelor	Master/Diploma	Doctorates	Habilitations
Academic stays abroad Year, duration, location				
Patents, licences				
Awards, prizes Year, name, awarding institution				

Publications

Bibliometrics* ***Please make sure that the information provided here matches the information in your attached list of publications!**		**Total**	**As first or last author**
Total number of publications in Medline-listed journals:	**Last 5 years**		
	Unlimited*		
	*Number of original papers		
	*Number of case studies		
	*Number of reviews/ editorials		
	*Number of book chapters		
Hirsch index (original work as first or last author, based on Scopus)			
Hirsch Index unlimited (based on Scopus)			

The following applies to applications for W2-tenure-track-W3 or W3 positions:

Your name must be included on the approval notice, including the funding reference number.

OWN third-party funding acquired to date (this refers to the funds that can be documented by approval notices)	
National funding agencies (please specify)	
European Union	
Foundations	
Other public authorities	
Private companies	

Please list the individual third-party funded projects according to the following specifications:

Title

Duration:	xx months (start month year - end month year)
Applicants:	Naming of all applicants
Grant application:	Name of funding organization
Funding reference number:	xxxxx
Overall budget:	y.yyy.yyy EUR

For joint projects
Title

Duration:	xx months (start month year - end month year)
Applicants:	Naming of all applicants
Grant application:	Name of funding organization
Funding reference number:	xxxxx
Overall budget:	y.yyy.yyy EUR
Specific budget:	xx.xxx EUR (Your name)

The following applies to applications for W1-tenure-track-W3 positions:

Ideally, your name should appear on the approval notice (including the funding reference number). If your name does not appear on the approval notice despite your involvement in the application process, your role in the application must be evident from the documents submitted; this should be confirmed by the initial applicant.

OWN third-party funding acquired to date / participation in third-party funding acquisitions (this refers to the funds that can be documented by approval notices)	
National funding agencies (please specify)	
European Union	
Foundations	
Other public authorities	
Private companies	

Please list the individual third-party funded projects according to the following specifications:

Title
Duration: xx months (start month year - end month year)
Applicants: Naming of all applicants
Grant application: Name of funding organization
Funding reference number: xxxxx
Role/task in the project: xxxxx
Overall budget: y.yyy.yyy EUR

For joint projects
Title
Duration: xx months (start month year - end month year)
Applicants: Naming of all applicants
Grant application: Name of funding organization
Funding reference number: xxxxx
Role/task in the project: xxxxx
Overall budget: y.yyy.yyy EUR
Specific budget: xx.xxx EUR (Your name)

Internationalisation Where? When? What?	
Co-operation in research and teaching	
Own experience abroad	

Interdisciplinary qualifications	
Experience with regard to - specialised didactics - leadership - management etc.	
'Engagement in the academic system', i.e. committee work, reviewer, editor, etc.	
Optional, additional information on your career (e.g., parental leave, illness, other delays in your academic career)	