Creighton
UNIVERSITY
School of Medicine

Program Director Applicant Screening Grid	*Experience Key*
Program/Department:	*5 = extensive experience (10+ years)*
Reviewers Name:	*3 = moderate experience (5-10 years)*
Reviewers Signature:	*1 = limited experience (1-5 years)*
Date:	*0 = Little to no experience (<1 year)*

	Mandatory							***Preferred***							
Applicant Name	Mission Fit with Institution and Alliance	Curriculum Development	Faculty/Educational Experience	Clinical Training	Accreditation Experience	Communication Skills	**Total Mandatory Experience**	Leadership Experience	Scholarly Experience	Mentoring	Management of Resources/Personnel	Enhancements of Clinical Learning Environment	**Total Preferred Score**	**Total Score**	**Comments**