**SSH Accreditation Biosketch**

*Note: Please reference the directions and sample*

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| **Name:** |  |
| **Title/Position:** |  |

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| **Brief Narrative of Simulation Experience (250 words or less)** |
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| **Background** |
|  | Item | Date of Completion |
| **Degree(s):** |  |  |
| **Licensure(s):** |  |  |
| **Healthcare Simulation Certification(s):** |  |  |
| **Healthcare Simulation Training:** |  |  |

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| **Scholarship in Simulation Activities** |
| **Articles (citations)** |
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| **Textbooks/textbook chapters (citation)** |
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| **Other media (citations/webpages/listing/etc.)** |
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| **Simulation Organization Memberships and Participation** |
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