

CONTACT INFORMATION

PERMANENT ADDRESS

Full Name: _____

Street Address: _____

City: _____

State or Province: _____

Country: _____

Postal/Zip Code: _____

Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Your Personal Web Page URL (optional): _____

Other: _____

CAREER OBJECTIVES

1. Why do I want to work in my chosen career field? _____

2. What can a career in this field give me? _____

3. What do I want to be doing five years from now? Why? _____

4. What do I want to be doing ten years from now? Why? _____

EDUCATIONAL EXPERIENCE

Name of the learning institution, school, or training center: _____

Contact information for this institution, school, or training center:

Street address: _____

City and state or province: _____

Zip or postal code: _____

Web address: _____

Phone number: _____

Email address: _____

Specific dates you attended: _____

Degrees, certificates, awards, recognition, or formal training received, or number of semesters or terms

attended: _____

Classes or sessions you attended that are particularly relevant to your career direction: _____

Classes or sessions you attended that are particularly relevant to your career direction: _____

Major: _____

GPA: _____

Status at end of course or training: _____

Brief description of your educational or training experience at this institution: _____

WORK EXPERIENCE AND INTERNSHIPS

Record the information for each job you have held beginning with the most recent. If you have held more than 4 jobs, duplicate the file.

Employer name: _____

Street address: _____

City and state or province: _____

Zip or postal code: _____

Web address: _____

Phone number: _____

Email address: _____

Job title: _____

Brief job description: _____

Specific dates employed in this job: _____

Name(s) of supervisor(s): _____

Phone number: _____

Email address: _____

Other contact name: _____

Phone number: _____

Email address: _____

Employer name: _____

Street address: _____

City and state or province: _____

Zip or postal code: _____

Web address: _____

Phone number: _____

Email address: _____

Job title: _____

Brief job description: _____

Specific dates employed in this job: _____

Name(s) of supervisor(s): _____

Phone number: _____

Email address: _____

Other contact name: _____

Phone number: _____

Email address: _____

WORK EXPERIENCE AND INTERNSHIPS (Continued)

Employer name: _____

Street address: _____

City and state or province: _____

Zip or postal code: _____

Web address: _____

Phone number: _____

Email address: _____

Job title: _____

Brief job description: _____

Specific dates employed in this job: _____

Name(s) of supervisor(s): _____

Phone number: _____

Email address: _____

Other contact name: _____

Phone number: _____

Email address: _____

Employer name: _____

Street address: _____

City and state or province: _____

Zip or postal code: _____

Web address: _____

Phone number: _____

Email address: _____

Job title: _____

Brief job description: _____

Specific dates employed in this job: _____

Name(s) of supervisor(s): _____

Phone number: _____

Email address: _____

Other contact name: _____

Phone number: _____

Email address: _____

RELEVANT PERSONAL DATA

In the space provided, record any professional accomplishments, professional affiliations, and other information that may describe your character.

PROFESSIONAL ACCOMPLISHMENTS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

ACTIVITIES AND OTHER SKILLS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

SPECIFIC EMPLOYABLE SKILLS

In the space provided, list the courses you have taken in college and describe what you are capable of doing as a result of completing the course. In addition, list other employable skills you may have obtained from previous work experiences.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

15. _____

REFERENCES

In the space below, record the information for at least three references. The references should not be close friends, ministers, or relatives.

Name of reference: _____

Title: _____

Organization: _____

Street address: _____

City and state or province: _____

Country, Zip or postal code: _____

Web address: _____

Email address: _____

Have you asked this person's permission? Yes No

Have you confirmed that this person will give you a positive recommendation? Yes No

Name of reference: _____

Title: _____

Organization: _____

Street address: _____

City and state or province: _____

Country, Zip or postal code: _____

Web address: _____

Email address: _____

Have you asked this person's permission? Yes No

Have you confirmed that this person will give you a positive recommendation? Yes No

REFERENCES (CONTINUED)

Name of reference: _____

Title: _____

Organization: _____

Street address: _____

City and state or province: _____

Country, Zip or postal code: _____

Web address: _____

Email address: _____

Have you asked this person's permission? Yes No

Have you confirmed that this person will give you a positive recommendation? Yes No

Name of reference: _____

Title: _____

Organization: _____

Street address: _____

City and state or province: _____

Country, Zip or postal code: _____

Web address: _____

Email address: _____

Have you asked this person's permission? Yes No

Have you confirmed that this person will give you a positive recommendation? Yes No
