

YOUR NAME HERE

Present Address

Type Your Address Here
List Phone, E-mail here

Permanent Address

Type Your Address Here
List Phone, Alternate E-mail here

OBJECTIVE [Click here and type objective]

EDUCATION **University of Northern Iowa**, Cedar Falls, IA
Bachelor of Arts: Leisure, Youth and Human Services
Focus Area:
Minor:
Degree Anticipated:

Other University, City, ST
Associate of Arts: Major
Degree Received:

RELATED EXPERIENCE

Agency Name City, ST Year-Present
Position Title

Describe your most recent job responsibilities. Be concise; remove all unnecessary words and phrases. Include the specific results of your actions or decisions to demonstrate your contribution. If you are still working at this job, use present tense. If you are no longer working at this job, use past tense.

Agency Name City, ST Year-Year
Position Title

In the same manner as above, describe your next most recent job responsibilities. If you are no longer working at this job, use past tense.

Agency Name City, ST Year-Year
Position Title

In the same manner as above, describe your next most recent job responsibilities. If you are no longer working at this job, use past tense.

ADDITIONAL EXPERIENCE

Agency Name City, ST Year-Present
Position Title

Describe your most recent job responsibilities. Be concise; remove all unnecessary words and phrases. Include the specific results of your actions or decisions to demonstrate your contribution. If you are still working at this job, use present tense. If you are no longer working at this job, use past tense.

**ADDITIONAL
EXPERIENCE, CON'T****Agency Name**

City, ST

Year-Year

Position Title

In the same manner as above, describe your next most recent job responsibilities.
If you are no longer working at this job, use past tense.

CERTIFICATIONS

- Community First Aid Expires: Month, Year
- CPR Expires: Month, Year
- OSHA Bloodborne Pathogens Year Received
- Mandatory Child Abuse Reporter Year Received
- Other Certification Year Received

SPECIAL SKILLS**Computer Skills**

- List applications and operating systems you can use

Other Skills

- List other professionally-related skills you'd like to highlight

REFERENCES

Available upon request

YOUR NAME HERE

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REFERENCES**Name**

Title
Company
Address 1
Address 2
City, ST Zip
Work Phone
Fax
E-mail

Name

Title
Company
Address 1
Address 2
City, ST Zip
Work Phone
Fax
E-mail

Name

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