**Qualifications/Skills or Summary Statement** *(Optional)*

2 – 3 Sentences about your qualifications or skills you possess. These are skills that make you an ideal candidate for the position in which you are applying. This statement can/should change based on the job description for the job you are interested in submitting your application to. *(This is about how long your statement should be)*

**Education**

School Name, City/State

**Degree/Certificate Earned Anticipated/Awarded Month Year**

* Academic Accomplishments, Student Organizations, Honors, Activities

**Licenses and Certifications**

License Name/Title – Issuing Agency **Date Awarded or Date Expires**

License Name/Title – Issuing Agency **Date Awarded or Date Expires**

**Clinical Experience**

**Student (Clinical Hours – XX)** **Month Year – Month Year**

Hospital Name - Toledo, OH ***– Areas or Units***

**Professional Experience or Employment History**

Name of Company – City/State **Dates of Employment**

**Job Title**

* Job Duties
* Job Skills
* Employment Accomplishments

Name of Company – City/State **Dates of Employment**

**Job Title**

* Job Duties
* Job Skills
* Employment Accomplishments

Name of Company – City/State **Dates of Employment**

**Job Title**

* Job Duties
* Job Skills
* Employment Accomplishments

**Community Involvement** *(Optional)*

* Organization Name, Brief description of organization if not obvious from name, dates (optional), brief description of your volunteer duties

**References**

|  |  |  |
| --- | --- | --- |
| Name, Credentials | Name, Credentials | Name, Credentials |
| Job Title | Job Title | Job Title |
| Company Name | Company Name | Company Name |
| Phone Number | Phone Number | Phone Number |
| Email Address | Email Address | Email Address |