**FIRST AND LAST NAME**

Address

Town, State and Zip Code

Email Address

Phone Number

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**CITIZENSHIP:** USA

**VETERANS PREFERENCE:** “Yes” or N/A

**FEDERAL CIVILIAN STATUS (***if applicable***):**

**OBJECTIVE**

Clearly specify the industry, federal agency, and department you are applying to, along with the position title, announcement or vacancy number, and grade level (if available). Additionally, consider including a brief statement highlighting your relevant experience or addressing a career transition, if applicable.

**EMPLOYMENT HISTORY** *(professional experiences)*

Name of organization, City, State

Position & title, Start & end date (MM/YYYY)

Grade level (applicable only for a federal job)

Salary (per hour/month/year), Job Type (full-time / part-time / internship / contract / temporary)

Supervisor (or HR rep who can verify employment) – name and phone number

Brief description of duties, and identify your major roles, responsibilities and accomplishments

**MILITARY SERVICE** *(if applicable)*

Branch of Service

Final Rank/Grade

Duty/Station/Unit, Location (city/state/country)

Start & end date (MM/YYYY)

Hours per Week

Supervisor – name and phone number

Brief description of duties, and identify your major roles, responsibilities and accomplishments

(Avoid military jargon, acronyms, and MOS codes unless they directly apply to the federal job. Focus on transferable skills, quantify achievements, include awards and recognitions, and list security clearance types and if they are active/expired (if relevant to job))

**SKILLS**

Skills related to education, those acquired throughout your career, and any personal skills that you want to highlight. Include, if applicable:

* Foreign language skills with the skill level (novice, intermediate, or advanced) in reading and/or writing
* Hard skills (i.e. technical, tools, programming)

**VOLUNTEER WORK**

Name of organization, City, State

Start & end date (MM/YYYY)

Brief description of duties, and identify your major roles, responsibilities, and accomplishments

**CERTIFICATIONS and/or LICENSES and/or TRAINING**

Name of the certification, Organization that granted it, City, State, Date(s) the certification is in effect (month /year)

**EDUCATION**

College or university, City, State

Type of degree and major, Date of graduation (month/year)

GPA

Honors or awards, if any