# First Last, Credentials

# Address City, State Zip ⚫ Phone ⚫ Email

# SUMMARY OF QUALIFICATIONS

* Point 1
* Point 2
* Point 3
* Point…

# PROFESSIONAL EXPERIENCE

(Interim layout)   
HOSPITAL, CITY, STATE (Month Year-Month Year)  
GALILEO SEARCH, LLC   
**Title**

* Summary of duties/purpose
* Authority
* Creativity
* Efficiency
* Recognition/awards
* Management
* Communication

(Full-Time layout)   
HOSPITAL, CITY, STATE (Year-Year)  
**Title**

* Summary of duties/purpose
* Authority
* Creativity
* Efficiency
* Recognition/awards
* Management
* Communication

# EDUCATION

(Completed Degree)   
**Full Degree Name (Year Completed)**College Name  
City, State

(OPTIONAL: INCLUDE GPA, RELEVANT ACTIVITIES)  
**Full Degree Name (Year Completed)**College Name   
City, State

* GPA
* Activity / Clubs / Groups (Year)

(INCOMPLETE DEGREE)   
**Full Degree Name (expected graduation Year)**College Name  
City, State

# LICENSURE & CERTIFICATION

(LICENSE EXAMPLE)  
**Name or Type of License (Active or Expiration Year)**  
State (if specific to a state or local)

(CERTIFICATION EXAMPLE)   
**Name or Type of Certification (Active or Expiration Year)**  
State/Local/National (optionally you can leave it off if it is national)

# PROFESSIONAL MEMBERSHIPS

(LIST OF PROFESSIONAL MEMBERSHIPS)

* Organization Name (Acronym), Your Role, Participation Date