

Alice Applicant, RN, BSN
Anywhere Lane Anytown, USA
999-999-9999
alice.applicant@email.org

EDUCATION: Include all institutions attended after high school with dates of attendance (whether program was completed or not). List in chronological order from newest to oldest.

Institution	Degree (if completed)	Dates of attendance
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EMPLOYMENT: List all professional (nursing as well as other professional) employment chronologically (newest to oldest) with description of type of site (outpatient, inpatient), role, and general description of function or tasks with dates of employment (include month and year).

Institution or firm	Rank or title	Dates of employment
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LICENSURE: Registered Nurse, State	Expiration date
Other licensure	Expiration date

CERTIFICATIONS: (Current certifications only with expiration date)

Advanced Cardiac Life Support	Expiration date
Pediatric Advanced Life Support	Expiration date
NCC (certification(s) type)	Expiration date
AACN (CCRN certification(s) type)	Expiration date
AWHONN (certification(s) type)	Expiration date
Childbirth educator (note organization)	Expiration date
Doula certification (note organization)	Expiration date
Lactation consultant (note organization)	Expiration date
State Certified or Licensed Midwife	Expiration date

PUBLICATIONS: (Use APA format for all listings)

PRESENTATIONS: Include date, location, title, and conference sponsorship

AFFILIATIONS: Memberships and positions held in relevant professional organizations (Specify organization, role, dates of membership)
Professional activities
Active duty, reserve, or military veteran (note years of service)

AWARDS: Honors, awards – include dates, source of award

COMMUNITY VOLUNTEER SERVICE:

Include relevant volunteer experiences with dates, locations, organizations, and any relevant international experiences.