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| --- | --- |
| YourNameRegistered NurseLicense type and number | Your Name[Street Address][City][Zip code][Contact number][Email Address] |
| **Competencies**Summary | [Competency 1] [Competency 2]horizontal line[Briefly talk about your background, accomplishments, and what you hope to achieve in the role you’re applying for]. |
| **Experience** | horizontal lineCompany Name / Job TitleMonth 20XX - Present, LocationCompany Name / Job TitleMonth 20XX - Month 20XX, LocationCompany Name / Job TitleMonth 20XX - Month 20XX, Location |
| Education | horizontal lineSchool Name / DegreeMonth 20XX - Month 20XX, LocationSchool Name / DegreeMonth 20XX - Month 20XX, Location |
| Licensure & CertificatesAwards | horizontal line[List all your licenses and certificates].horizontal line[List all your awards by date]. |