

RESUME INFORMATION FORM

First Name: _____ MI: ____ Last Name: _____

Current Address: _____

City: _____ State: ____ Zip: _____

Phone # : (____) ____ - _____ Alternate Phone # (____) _____ - _____

Work Experience (Most Recent First)

Job #1

Date of Employment (month/year): _____ to _____

Company Name: _____

Job Title: _____

Description of work duties/responsibilities:

(1) _____

(2) _____

(3) _____

Job #2

Date of Employment (month/year): _____ to _____

Company Name: _____

Job Title: _____

Description of work duties/responsibilities:

(1) _____

(2) _____

(3) _____

Education

Date Graduated (month/year): _____

Name of School or College Attended: _____

Course of Study: _____

Degree Earned (Diploma, GED, Degree) _____

Skills

Summary of Work Skills: _____

Computer Skills: _____
