

First Last Name

Email: your.email@university.edu

Phone: (123) 456-7890

LinkedIn: linkedin.com/in/username

Address: City, State, ZIP

Education

Bachelor of Science in [Major]

University Name, City, State — Expected Graduation: Month Year

GPA: ___/4.0

Internship Experience

[Position Title]

Company Name, City, State — Month Year – Month Year

- Responsibility or achievement one.
- Responsibility or achievement two.

Projects

Project Title

Brief description of the project and main technologies used.

Skills

Skill 1

Skill 2

Skill 3

Skill 4

Activities & Leadership

- Organization or Club Name — Role, Month Year – Month Year

References

Available upon request.