

[Your Name]

[Address] | [City, State ZIP]
[Phone Number] | [Email Address] | [LinkedIn/Website]

PROFESSIONAL SUMMARY

[Brief summary of experience, teaching philosophy, and key strengths as a classroom instructor.]

EDUCATION

[Degree], [Institution Name] [Year]

[Relevant coursework, honors, or certifications]

TEACHING EXPERIENCE

[Position Title], [School/Institution] [Month Year] – [Month Year]

- [Responsibility, achievement, or task]
- [Responsibility, achievement, or task]

[Position Title], [School/Institution] [Month Year] – [Month Year]

- [Responsibility, achievement, or task]
- [Responsibility, achievement, or task]

CERTIFICATIONS

- [Certification Name], [Year]
- [Certification Name], [Year]

SKILLS

- [Skill 1]
- [Skill 2]
- [Skill 3]

PROFESSIONAL AFFILIATIONS

- [Organization Name], [Role/Member], [Year(s)]