

First Last Name

Address Line 1, City, State ZIP

Email@example.com | (123) 456-7890 | LinkedIn: linkedin.com/in/yourname

PROFESSIONAL SUMMARY

CORE SKILLS

- Skill One
- Skill Two
- Skill Three

PROFESSIONAL EXPERIENCE

Job Title – Company Name

City, State | Month Year – Month Year

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

EDUCATION

Degree, Major

University Name – City, State | Month Year

CERTIFICATIONS & LICENSES

- Professional Engineer (PE), State – License No., Year
- Other Certification, Organization – Year

PROJECTS

Project Title

Brief description, your role, and impact.

PROFESSIONAL AFFILIATIONS

- Organization Name – Member, Role, or Office (Year–Year)