

# First Last Name

City, State ZIP | (123) 456-7890 | email@example.com | LinkedIn Profile (optional)

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## Objective

Brief statement highlighting your career goals, relevant skills, and interest in the medical field.

## Education

Degree (e.g. Bachelor of Science in Biology)  
School Name, City, State | Graduation Month Year  
Relevant Coursework: (list or summarize)

## Certifications & Training

Certification (e.g. CPR, First Aid) | Issuing Organization | Year

## Experience

Job Title (or Volunteer Title)  
Organization Name, City, State | Dates (Month Year – Month Year)  
- Brief bullet describing role, responsibility, or achievement  
- Brief bullet describing skill utilized or gained

## Skills

Laboratory techniques, patient care, medical terminology, software proficiency, etc.

## Honors & Activities

Scholarships, Dean's List, clubs, volunteer work, etc.

## References

Available upon request.