YOUR NAME [Street Address], [City, ST ZIP Code] | [Phone] | [E-Mail] **EDUCATION** University, City, State Year Degree Type Degree area University, City, State Year Degree Type Degree area RESEARCH Department, PI, University Year Project Title One line summary of project' Department, PI, University Year Project Title One line summary of project Continue to add all of the laboratories in descending chronological order **TECHNIQUES** Department, PI, University Year List techniques Department, PI, University Year List techniques Continue to list all labs and techniques in descending chronological order PUBLICATIONS AND PAPERS Publication title and information Year **PRESENTATIONS** Presentation title, location/meeting Year SKILLS

AWARDS
MEMBERSHIPS

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