Jane Doe

123-456-7890 | professionalemail@gmail.com | City, State

# Professional Summary

Your Professional Summary is a snippet of who you are as a professional and what you will bring to the role. This is your chance to show yourself to the hiring manager and pique their interest in you so they can keep reading. You should curate it to the best of your ability for the job you are applying to and keep it at 3 sentences and below.

# Education

**Bachelor of Science in Nursing City, State**

Name of University - GPA 4.0, (August 2019)

**Diploma of Practical Nursing City, State**

Nurse Hospital School of Practical Nursing, (April 2016)

# Clinical Rotations

**Children’s Hospital, June 2019 – August 2019**

*Emergency Department/Level 1 Pediatric Trauma center – Senior Practicum (96 hours)*

**Medical Hospital, April 2019 – June 2019**

*Cardiovascular Intensive Care Unit – Medical/Surgical 3 Rotation (135 hours)*

**Homeless Shelter, January 2019 – March 2019**

*Volunteer Services – Public Health Rotation (90 hours)*

**Children’s Hospital, October 2018 – January 2019**

*Respiratory Unit – Pediatrics Rotation (67.5 hours)*

**North Hospital, August 2018 – October 2018**

*Labor & Delivery/Post-Partum/Obstetrics Rotation (67.5 hours)*

**West Hospital, June 2018 – August 2018**

*Medical/Surgical Unit – Medical/Surgical 2 Rotation (135 hours)*

**Southern Hospital, April 2018 – June 2018**

*Psychiatric Unit – Mental Health Rotation (90 hours)*

**Rehabilitation Hospital, January 2018 – March 2018**

*Rehabilitation Unit – RN Skills (LPN-BSN Transition) (90 hours)*

# Certifications

# Registered Nurse, BSN (Pending NCLEX Exam)

# BLS for Health Care Providers: American Heart Association, Exp. month/year

# Licensed Practical Nurse (LIC #:PN123456): State Board of Nursing, Exp. month/year

# IV Therapy Certified: National Healthcare Institute

# Experience

# Licensed Practical Nurse City, State

# *Assisted Living facility 2 Month, Year – Month, Year*

# Job duties

# Job duties

# Job Duties

# Licensed Practical Nurse City, State

# *Assisted Living Facility 1 Month, Year – Month, Year*

# Job Duties

# Job Duties

# Job Duties