FULL NAME

Address

City, MI Zip Code

Contact:

Email:

OBJECTIVE:

SUMMARY OF QUALIFICATIONS

RELATED SKILLS

EDUCATION

*YOUR HOME SCHOOL, CITY/STATE*

September 20XX-Present

Frederick V. Pankow Center, Clinton Township, MI

YOUR CLASS (S), September 20XX-Present

WORK HISTORY

VOLUNTEER HISTORY

ACCOMPLISHMENTS

FULL NAME

Address

City, MI Zip Code

Contact:

Email:

REFERENCES

Teacher Name, Teacher Title

L’Anse Creuse High School

38495 L’Anse Creuse Road

Harrison Township, MI 48045

Contact: (586) 783-6400 Extension: XXXX

Fax: (586) 783-6408

Email: xxxxx@lc-ps.org

Teacher Name, Teacher Title

L’Anse Creuse High School North

23700 Twenty One Mile Road

Macomb, MI 48042

Contact (586) 493-5270 Extension: XXXX

Fax: (586) 493-5275

Email: xxxxx@lc-ps.org

Teacher Name, Teacher Title

Frederick V. Pankow Center

24600 F.V. Pankow Boulevard

Clinton Township, MI 48036

Contact: (586) 783-6570 Extension: XXXX

Fax: (586) 783-6577

Email: xxxxx@lc-ps.org

Name, Title

Business or Company Name

Address

City, State Zip Code

Phone Number

Fax Number

Email: