**EDUCATION**

University of Arizona, Tucson, AZ

**Doctor of Nursing Practice – In progress** Expected: Graduation Month Year

Previous academic institutions, City, State

**Full Name of Degree** Graduation Month Year

*List any relevant academic awards/scholarships separated by commas*

**LICENSURE**

Registered Nurse, X State Board of Nursing

*License # 123*

**CERTIFICATIONS**

Basic Life Support (example) Year – Present

**WORK EXPERIENCE**

*Position Title* Month Year – Month Year

Name of Department, Organization Name, City, State

* Brief description of what you did in this role.

**HONORS, AWARDS, OR SCHOLARSHIPS**

List any honors, awards, or scholarships (Year)

**PROFESSIONAL AFFILIATIONS**

List any professional groups you have been a member of. Year –Year or Present

**SCHOLARLY WORK**

List any professional presentations, publications, or projects here formatted in APA citation style.

**VOLUNTEER EXPERIENCE**

*Position Title* Month Year – Month Year

Name of Event, Organization Name, City, State

* Brief description of what you did in this role.

**REFERENCES**

List any professional references (name, title, and contact information) or ‘Available Upon Request’