**First Name Last Name**

Lastname.osu.edu **|** Cell Phone # **|** LinkedIn profile custom URL | City, State

**EDUCATION**

**The Ohio State University, College of Veterinary Medicine Columbus, OH**

*Doctor of Veterinary Medicine Graduation Month Year*

* Optional Specialization
* Optional Recipient of X Scholarship

**Undergraduate Institution City, State**

*Degree Graduation Month Year*

* Optional GPA

**CLINICAL EXPERIENCE**

**Company Name City, State**

*Position Title Month Year – Month Year*

* Achievement-oriented bullet points
* Achievement-oriented bullet points
* Achievement-oriented bullet points

**Company Name City, State**

*Position Title Month Year – Month Year*

* Achievement-oriented bullet points
* Achievement-oriented bullet points
* Achievement-oriented bullet points

**VETERINARY EXPERIENCE**

**Company Name City, State**

*Position Title Month Year – Month Year*

* Achievement-oriented bullet points
* Achievement-oriented bullet points
* Achievement-oriented bullet points

**RESEARCH EXPERIENCE**

**Company Name City, State**

*Position Title Month Year – Month Year*

* Achievement-oriented bullet points
* Achievement-oriented bullet points
* Achievement-oriented bullet points

**VOLUNTEER/EXTRACURRICULAR ACTIVITIES/PROFESSIONAL ASSOCIATIONS**

**Organization Name City, State**

*Position Title Month Year – Month Year*

* Achievement-oriented bullet points
* Achievement-oriented bullet points

**OTHER EXPERIENCE**

**Company Name City, State**

*Position Title Month Year – Month Year*

**SKILLS & CERTIFICATIONS**

* Fluent in another language
* Relevant certifications