

**RESUME PREPARATION GUIDE**  
CHRONOLOGICAL RESUME WORKSHEET

**HEADING**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY, STATE, & ZIP: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**Skills**

LIST ANY SKILLS THAT YOU MIGHT HAVE INCLUDING; EDUCATIONAL TRAINING, SKILLS LEARNED "ON THE JOB", ANY CERTIFICATIONS AND LICENSES (CDL, CNA, CPR, KEYBOARDING, ETC.).

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Personal Skills**

List any personal skills including; Detail Oriented, Responsible, Good Communication Skills

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**SUMMARY**

INCLUDE STRENGTHS, YEARS OF EXPERIENCE AND WORK RELATED PERSONAL CHARACTERISTICS IN 50 WORDS OR LESS.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORK EXPERIENCE**

EMPLOYER: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

RESPONSIBLE FOR: (START WITH ACTION VERBS i.e. INSTALLED, IMPLEMENTED, DEVELOPED)

- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

EMPLOYER: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

RESPONSIBLE FOR: (START WITH ACTION VERBS i.e. INSTALLED, IMPLEMENTED, DEVELOPED)

- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

EMPLOYER: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

RESPONSIBLE FOR: (START WITH ACTION VERBS i.e. INSTALLED, IMPLEMENTED, DEVELOPED)

- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

DATES OF ATTENDANCE: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

DEGREE OBTAINED: \_\_\_\_\_

SPECIAL AWARD OR  
ACCOMPLISHMENT: \_\_\_\_\_

\_\_\_\_\_