

First M. Last Name
Street Address
City, State Zip
(000) 000-0000
youremail@address.com

EDUCATION

20XX – present Sophie Davis Biomedical Education Program/The City University of New York (CUNY) School of Medicine, The City College of New York (CCNY), New York, NY
BS, Biomedical Science, Expected 6/20XX
Medical Degree, Expected 5/20XX

HONORS AND AWARDS

20XX	<i>Magna Cum Laude</i>	Sophie Davis Biomedical Education Program, CCNY
20XX	Dean's List	The City College of New York
20XX	Award Name	Institution name

WORK EXPERIENCE

1/20XX - Present **Tutor, Student Learning Resource Center**
Sophie Davis Biomedical Education Program, CCNY

- Create individualized lesson plans for students struggling in various subjects, foster study strategies, and develop test-taking skills.

1/20XX – 12/20XX **Administrative Assistant, Name of Organization, City, State**

- Performed clerical duties, scheduled meetings, and maintained internal files.

LEADERSHIP

1/20XX – Present **President, Name of Organization**
CUNY School of Medicine

- Coordinate monthly meetings and group activities geared towards supporting members academically, socially, and emotionally.

1/20XX – 12/20XX **Entry #2 Your Role, Name of Organization**
Where

- Description of activity, starting with past tense or present tense verb

TEACHING EXPERIENCE

12/20XX – 12/20XX **Your role, Name of Institution, City, State**

- Subject/course taught, level of students, hours per week/month/semester

12/20XX – 12/20XX **Your role #2, Name of Institution, City State**

- Subject/course taught, level of students, hours per week/month/semester

RESEARCH EXPERIENCE

- 12/20XX – 12/20XX **Research Assistant**
“Name of research, if applicable and keep quotes around the title.”
Sophie Davis Biomedical Education Program, CCNY
Department of Community Health and Social Medicine
Preceptor: FILL IN NAME, **Md? PhD? EdD? etc**
- Investigated theFILL in a sentence that explains the research
- 12/20XX – 12/20XX **2nd Research Experience here like above – add rows as needed**

PUBLICATIONS AND PRESENTATIONS

Use AMA - examples below. See annotated template for additional info

Teuscher, C., Bunn, R. **Fillmore, P.D.**, Butterfield, J.F., Zachary, E.P. Gender, age, and season at immunization uniquely influence the genetic control of susceptibility to histopathological lesions and clinical signs of experimental allergic encephalomyelitis: Implications for the genetics of multiple sclerosis. *American Journal of Pathology*, 2009;165(5):1593-602.

Fillmore, P.D., Gerding, P., Sayegh, S. Effect of an intra-corneal fluid interface following keratotomy on intraocular pressure measurement by applanation. Oral Presentation, Association for Research in Vision and Ophthalmology, April 25, 2009.

COMMUNITY SERVICE/VOLUNTEER WORK

- 12/20XX – 12/20XX **Your role, Group Name or Activity Name**
- Description of activity you undertook

ORGANIZATIONS/PROFESSIONAL MEMBERSHIPS

- 12/2016 – Present American Medical Association
12/2013 – Present Student National Medical Association
12/2013 – 12/2015 Entry #3

SKILLS

- Languages: Fluent Spanish, Basic Mandarin
Software: Example Stata, SPSS , SAS

CERTIFICATIONS

- Month/Year Basic Life Support
Month/Year NYS Infection Control