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| **EDUCATION** |

**Degree Date**

Honors:

 Senior Thesis:

School – City, State

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| **CREDENTIALS** |

* Certificate **Date**
* School, City, State
* Credentials Veterinary Technician – State **Date**

 - License #

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| **VETERINARY PHYSICAL REHABILITATION EXPERIENCE**  |

**Title**  **Date**

*Hospital • City, State*

* Description of duties

**Title**  **Date**

*Hospital • City, State*

* Description of duties

**Title - Volunteer**  **Date**

*Hospital • City, State*

* Description of duties

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| **VETERINARY TECHNICIAN EXPERIENCE** |

**Credentialed Veterinary Technician**  **Date**

*Hospital • City, State*

* Description of duties

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| **OTHER EXPERIENCE**  |

**Organization Date**

*Role*

*Other Duties*

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| **PROFESSIONAL PRESENTATIONS**  |

**Hospital, Venue, or Conference Date**

City, State

*Instructor/Mentor, Presenter, Invited Guest*

Learning Objective:

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| **PROFESSIONAL MEMBERSHIPS**  |

**Organization Date**

*Associate Member*

**National Association of Veterinary technicians in America Date**

*Member #*

|  |
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| **PUBLICATIONS**  |

**Title of Publication Date**

*Contributing Author/Co-author – Chapter Title*

**Title of Publication Date**

*Contributing Author/Co-author – Chapter Title*

Learning objective: