**NAME**

Address • City, State Zip Code • Telephone • [Email](mailto:cchanti@coastal.edu)

**CERTIFICATION**

State Residency Certificate, Year Earned

Endorsement:

Any other certifications and years associated with them.

**EDUCATION**

Bachelor of Arts in Education, Physical Education and Health P-12,

School, City, State Graduation Date

**RELEVANT TEACHING EXPERIENCE**

***Job title,*** Company name, City, State Start date-End date

* Job responsibilities/activities

***Job title,*** Company name, City, State Start date-End date

* Job responsibilities/activities

***Job title,*** Company name, City, State Start date-End date

* Job responsibilities/activities

***Job title,*** Company name, City, State Start date-End date

* Job responsibilities/activities

**RELATED VOLUNTEER EXPERIENCE**

***Job title,*** Company name, City, State, Start date-End date: Short description

***Involvement/Organization,*** City, State, Start date-End date: Short description

***Involvement/Organization,*** City, State, Start date-End date: Short description

***Involvement/Organization,*** City, State, Start date-End date: Short description

**PROFESSIONAL AFFILIATIONS**

List any professional affiliations or organizations that you are a part of here.