

General Pharmacist Résumé

Name: _____

Note to Applicant: This résumé is in a standardized format to enable the information about you, your education, skills and work history to be entered into the jobs database for <http://www.cdnwork.com> . It also means that when an employer gets your résumé, they will be better able to match your skills and experience to the position available.

Instructions

Fill in the blank as specified in the instructions for that area. Note: if you are on a computer, just tab to the blank area and proceed. Put N/A (Not Applicable) in areas that do not apply. **If you have a paper copy only, please print**, filling it in neatly, and use extra sheets of paper to add materials when the space available is not enough.

PART ONE: PERSONAL AND EDUCATION

Section 1.1: Personal Information

Name: (last, first, middle)	
Former Name:	
* Civil Status: (single/married/widow/separated)	
* Gender (male or female):	
*Number of Dependents: (or none)	
* Your Age (years in numbers)	
* Date of Birth (dd/mm/yyyy)	
Citizenship:	

Note: Any field with an asterisk (*) is to be filled out on a voluntary basis.

Section 1.2: Address

Current Address (where you are presently living):

Company or family name:	
Street Address or Box Number:	
District:	
City:	
Province:	
Zip Code	

Country	
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Method of Contact (please also state preferred method with an asterisk (*)):

Home Telephone:	
Work Telephone:	
Cellular Telephone:	
Fax Number:	
E-Mail address (all applicants must have an e-mail address:)	

Section 1.3: Education

Secondary School Name and Location	
Post-Secondary Degree:	
Location:	
Start date (mm-yyyy)	
End Date (mm-yyyy)	
List Major areas of study:	
List Minor areas of study:	

Other Degrees:

2 nd Post-Secondary Degree	
Location:	
Date rec'd: (mm-yyyy)	
Program/Degree:	
3 rd Post-Secondary Degree:	
Location:	
Date rec'd: (mm-yyyy)	

Program/Degree:	
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Section 1.4: Professional Development and Further Training

Starting at the most recent, note important courses or seminars taken. All certificate courses (i.e. upgrading, First Aid, CPR, emergency preparedness, professional upgrading courses, management training, computer software, etc. should be considered. **If a certificate was received, please put a ✓ in the box.** Also, please attach a copy of the certificate to the résumé. Continue as necessary, copy and paste for all your courses, seminars, training programs, etc. Do not put in religious or political courses (if in doubt, put them in and we will delete any that are not considered applicable).

Training Course 1: Cert received?	Name: Date (mm-yyyy)
Training Course 2: Cert received?	Name: Date (mm-yyyy)
Training Course 3: Cert received?	Name: Date (mm-yyyy)
Training Course 4: Cert received?	Name: Date (mm-yyyy)
Training Course 5: Cert received?	Name: Date (mm-yyyy)
Training Course 6: Cert received?	Name: Date (mm-yyyy)
(Continue as required)	

Section 1.5: English Test You need the TOIEC & TSE or the TOEFL & TSE or the IELTS, or the Melab, -(the first pair OR the second pair OR the IELTS OR the Melab) (Note: If you haven't taken an English test, please look into how you can take one and put a note that "I will be taking _____(name of test) English test on _____(date of test).

Name of Test:	TOIEC	TOEFL	TSE	IELTS	MELAB
Score:					
Date:					

Section 1.6: Academic/ Professional awards (if applicable)

Award 1:	
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Award 2:	
Award 3:	
Award 4:	

Section 1.7: Core Competencies

List 3-5 core skills or competencies that you've developed and that you consider highly transferable. These should be directly related to your skills as a pharmacist.

1.
2.
3.
4.
5.

PART TWO: WORK HISTORY

Section 2.1: Work

Enter your work history in order **starting with your most recent** position. If you are using this as a paper copy, use extra sheets and simply note down

Work Position 1:

Name of Institution:	
Type of Pharmacy (community based, hospital based, other and size of pharmacy in relation to staff)	
Start Date to End Date (or present)	
Job Title (s):	

Duties and Responsibilities:

1)
2)
3)
4)
5)
6)

Work Position 2

Name of Institution:	
Type of Pharmacy (community based, hospital based, other and size of pharmacy in relation to staff)	
Start Date to End date (mm/yyyy)	
Job Title (s):	

Duties and Responsibilities:

1) 2) 3) 4) 5) 6)	
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Work Position 3

Name of Institution:	
Type of Pharmacy (community based, hospital based, other and size of pharmacy in relation to staff)	
Start Date to End date (mm/yyyy)	
Job Title (s):	

Duties and Responsibilities:

1) 2) 3)	
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4)
5)
6)

Work Position 4

Name of Institution:	
Type of Pharmacy (community based, hospital based, other and size of pharmacy in relation to staff)	
Start Date to End date (mm/yyyy)	
Job Title (s):	

Duties and Responsibilities:

1)
2)
3)
4)
5)
6)

(Add additional work history positions and duties by copying the above sections.)

Section 2.3: Other skills (management training for business purposes, computer courses, etc.)

Name of Course/Length/Date(mm-yyyy)

Skill 1:	
Skill 2:	

Section 2.4: Professional Affiliations

List any affiliations you belong to, including the date/location you joined.

Organisation 1:	
Organisation 2:	
Organisation 3:	

Continue as necessary

Section 2.5: References:

Please list three individuals that will supply a reference for you. They should be supervisors or colleagues. Let these people know you are doing this. Include their phone number if you can. However, if you do not want your present employer to know you are applying for immigration, do not put the phone number in.

1)

2)

3)

Applicant:

Now that you've completed the general resume, please go through and delete anything that is not required (instructions, extra spaces for jobs or degrees, etc.). This will greatly assist Success Immigration Services to process your resume.

Thank you.