

FULL NAME, DESIGNATION

Home Address (123) 456-7890 City, Province Postal Code **Email Address** PROFESSIONAL EXPERIENCE Company Name, Title, City, Province Year - Present Title, City, Province (if applicable) Year - Year **Title,** City, Province (if applicable) Year - Year List experience here List experience here (For further details see attached synopsis of legal experience) Company Name, Title, City, Province Year - Year Highlights: List experience here List experience here EDUCATION **University Name**, List the Faculty/Designation, List Honours (if applicable) Year - Year **University Name**, List the Faculty/Designation, List Honours (if applicable) Year - Year **University Name**, List the Faculty/Designation, List Honours (if applicable) Year - Year AWARDS & HONOURS List Awards and Honours (Year) List Awards and Honours (Year) PROFESSIONAL ASSOCIATIONS Member, Law Society of Province Member, Canadian Bar Association **Professional Organization/Association, Position** Year - Year **Professional Organization/Association, Position** Year - Year RECENT PUBLICATIONS List your recent publication (if applicable) List your recent publication (if applicable)

• Fluent in Language, Language, and working knowledge of Language

ADDITIONAL INFORMATION