

## CURRICULUM VITAE

### Name, Degree

#### Contact Information

Address:

Phone:

Email (use university email):

#### EDUCATION

2015-present            **Florida International University**, Miami FL  
NASP-approved program  
Ed.S. Student in School Psychology

Years Enrolled            **Previous Institution**  
BS in Field/Major

#### CERTIFICATIONS (if any)

Florida School Psychologist, Professional Certificate #1188828 (valid until 2022)

#### FIELD PRACTICUM EXPERIENCE

Years or            **School Psychology Field Practicum Student** (anticipated field hours total)  
Semester            School(s) and/or District Name, Location  
Enrolled            School Psychologist Supervisor:  
                                 • Conducted...  
                                 • Contributed...  
                                 • Provided...  
                                 • Observed....

#### OBSERVATION PRACTICUM EXPERIENCE

Years or            **School Psychology Observation Practicum Student** (total observation hours)  
Semester            School(s) and/or District Name, Location  
Enrolled            School Psychologist Supervisor:  
                                 • Observed...

#### PROFESSIONAL WORK OR RELATED EXPERIENCE

#### TEACHING EXPERIENCE

#### RESEARCH EXPERIENCE

#### PUBLICATIONS (use APA reference)

**CONFERENCE PRESENTATIONS** (use APA reference)

**Last Name, First Initial.** (Year, Month). *Title of presentation.* Paper presented at the annual convention of the Teacher Education Division of the Council for Exceptional Children, Las Vegas, NV.

**SERVICE PRESENTATIONS** (use APA reference)

**Last Name, First Initial.** (Year, Month). *Title of presentation.* To be presented to parents and teachers at the School District of Palm Beach County, Boca Raton, FL.

**PROFESSIONAL SERVICE**

2018-2019                      Newsletter Editor, School Psychology Student Association

**HONORS & AWARDS**

Year                              Honor, Award or Recognition Name

**PROFESSIONAL MEMBERSHIP**

Florida Association of School Psychologist (FASP), Student Member  
National Association of School Psychologists (NASP), Student Member

**PROFESSIONAL DEVELOPMENT**

Month, Year                      FASP Workshop on (Title of Workshop)  
February 2017                      NASP Mini-Skills Presentation on (Title of Presentation)

**TESTS ADMINISTERED** (This is entirely optional. I don't typically recommend, but I have seen this)

**LANGUAGE SKILLS**

English: Native language  
Spanish: Fluent (speaking, reading), Basic (writing), Proficient (listening)

**PROFESSIONAL REFERENCES** (provide at least 3)

Full name, Degree  
Title  
Institution / Organization  
Address  
*Phone*  
*Email*