First Day of School Student Resume

Leci's Lecinolity

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Stua	ent	Res	umé

Name:	
Phone:	
Email:	
Favorite quote:	
	Attach photo here
Objective:	
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Personal Background:	
,	Place of birth:
Date of birth:	Place of birth:
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Date of birth:	Place of birth:ars attended Location
Date of birth:	
Date of birth:	
Date of birth:	
Date of birth:	ars attended Location
Date of birth: **Cademic Experience:** Name of School Year Favorite teachers: Favorite classes:	ars attended Location

Halfies and Interests

Phone Number

Let your middle & high school students tell you who they are!

Thank you!

Let's Connect!





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Student Resumé

Name:		
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Email:		
Favorite quote:		
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Date of Birth		
Academic Experience:		
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Name of School	Years attended	Location
Favorite teachers:		
Favorite classes:		
Favorite school memo	ory:	

Activity	Years involved	Hours per week
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Awards and A	Iccomplishments	Hobbies and Interests
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References		
Parent Nan	ne Relation	ship Phone Numbe
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What else	e should your teac	her know about you?
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Student Resumé

Name:		
Phone:		
Email:		
Favorite quote:		
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Objective:		
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Personal Background:		
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Date of birth:	Place of bir	th:
Academic Experience:		
Name of School	Years attended	Location
Favorite teachers:		
Favorite classes:		
Favorite school memo	ory:	
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Extracurricular and Work Experience:

Activity	Years involved	d Hours per week
Awards and Ac	complishments	Hobbies and Interests
	•	***
References Parent Name	e Relatior	nship Phone Number
Idditional Inform		
What else s	hould your tead	cher know about you?