**[ YOUR NAME ], PT, DPT**

[ CITY, STATE ] | [ PHONE NUMBER ] | [ EMAIL ]

**Objective**

Obtain a part/full-time Physical Therapist position with [ COMPANY NAME ] to further my knowledge and gain a profound experience in an [ TYPE ] of setting.

Licensure

Oregon Board of Physical Therapy License # [ INSERT ] Issued [ DATE ]

OR

Anticipated date of licensure in the state of [ INSERT ] is [ DATE ]

**Education**

Doctor of Physical Therapy Degree

[ SCHOOL ], [ CITY, STATE ]

Bachelor of Science in [ MAJOR ]

[ SCHOOL ], [ CITY, STATE ]

**Clinical Affiliations** (list in chronological order, most recent first)

[ CLINIC NAME, CITY, STATE ] [ DATE ]

[ SETTING TYPE ]

[ CLINIC NAME, CITY, STATE ] [ DATE ]

[ SETTING TYPE ]

[ CLINIC NAME, CITY, STATE ] [ DATE ]

[ SETTING TYPE ]

SAMPLE DESCRIPTORS

* Evaluated and treated 90-100% of Clinical Instructor’s case load
* Handled high volume workloads with efficiency and productivity
* Facilitated recovery for patients of various backgrounds and skill level, from sedentary adults to young athletes
* Experienced working with geriatric patients and working on fall prevention strategies
* Participated in marketing to doctors and medical groups
* Worked cooperatively with multiple health disciplines
* Trained to work under limited time frames and with complex patients
* Practiced effective time management between patient interactions and documentation
* Worked with various patient populations including: post-op knee and shoulder procedures, chronic pain, patients with Parkinson’s Disease, and acute injuries
* Created treatment plans for patients with complex conditions such as…
* Advised patients on appropriate care of their condition
* Educated patients on condition and best course of treatment based on initial evaluation
* Prescribed specific exercises to reduce pain to improve functional with activities of daily living using shared decision making
* Collaborated with administrative staff to bill insurances properly and accordance to state laws
* Developed individualized home exercise programs with consideration of quality and conciseness

**Work Experience** (include relevant work experience that can represent your skill and ability to work in teams, time management, problem solving, or related to PT)

[ OCCUPATION ] [ DATE ]

[ COMPANY NAME, CITY, STATE ]

**Certifications** (K-tape, IASTM, CSCS, etc.)

Basic Life Support for Healthcare Providers (CPR and AED) [ EXP. DATE ]

* American Heart Association

[ CERTIFICATION ] [ DATE CERTIFIED ]

**Special Skills**

* Proficient in electronic medical record systems: [ INSERT EMR TYPE ] (examples: Epic Hyperspace, AthenaHealth, Rehab Optima, Raintree)
* Language(s):

**Professional Memberships** (advocacy clubs for PT)

American Physical Therapy Association [ DATE ] to present

* Oregon and California Chapter

**Honors and Awards**

**References** – Available upon request (saves room on your sheet, unless you’d like to add it)

**\*Pro tip: When you open Microsoft Word, you can select a template. Search “resume” and beautiful layouts should pop up!**