*[](https://go.fbinet.fbi/)***Instructions:** Please read this guide before submitting your resume and be sure that you include all necessary information for each section. It is imperative that you provide a complete federal resume to be considered for a position with the FBI.

**SUMMARY STATEMENT**

Provide three to five brief statements highlighting your most important and relevant skills. This serves as a roadmap for the rest of your resume.

**PROFESSIONAL SKILLS**

List skills related to your education, those acquired throughout your career, and any personal skills that you want to highlight.

Include, if applicable:

* Foreign language skills with the skill level (novice, intermediate, or advanced) in reading and/or writing
* Technology skills

**PROFESSIONAL WORK EXPERIENCE**

List your full-time, professional work history. Start with your most current and work backward. The following **MUST** be included:

* Position & title
* Name of organization and location (city/state)
* Start & end date (MM/YYYY)
* Salary (per hour/month/year)
* Hours per week, Full-time or part-time
* Supervisor (or HR rep who can verify employment) – name and phone number
* Brief description of duties, and identify your major roles, responsibilities and accomplishments

**OTHER WORK EXPERIENCE**

List any other work experience including part-time, internships, seasonal positions, and/or temporary employment. Start with your most current and work backward. The following **MUST** be included:

* Position & title
* Name of organization and location (city/state)
* Start & end date (MM/YYYY)
* Salary (per hour/month/year)
* Part-time / internship / seasonal / temporary
* Supervisor (or HR rep who can verify employment) – name and phone number
* Brief description of duties, and identify your major roles, responsibilities and accomplishments

**EDUCATION**

Start with your highest-level degree and work backward. The following **MUST** be included:

* Type of degree and major
* College or university and city/state
* Date of graduation (month/year)
* GPA
* Honors or awards, if any

**CERTIFICATIONS/ACHIEVEMENTS**

List any certification or licenses you currently hold. The following **MUST** be included:

* Name of the certification
* Organization that granted it and location (city/state)
* Date(s) the certification is in effect (month /year)

**TRAINING**

List any formal training including accreditations. The following **MUST** be included:

* Name of the training and location (city/state)
* The sponsored organization
* Start & end date (month/year)
* Number of hours

**VOLUNTEER EXPERIENCE / COMMUNITY SERVICE**

List any volunteer work and/or community service that may showcase any additional skills that you have acquired apart from your professional career. Start with your most current and work backward. The following **MUST** be included:

* Name of organization and location (city/state)
* Start & end date (MM/YYYY)
* Brief description of duties, and identify your major roles, responsibilities, and accomplishments

\*\*MILITARY APPLICANTS\*\*

Please list your military service. The following **MUST** be included:

* Rank/Grade/Job Title
* Start and end date, or date of expected separation (month/year)
* Branch of military (Active or Reserve)
* Unit address
* Salary (base salary with locality, minus allowances)
* Full-time or part-time, if Reserve.
* Supervisor/First Line Leader – name, title and phone number
* Veterans’ Preference (see chart)
* Brief description of your primary duties, identifying your responsibilities and accomplishments

| **Veterans Preference** | |
| --- | --- |
| **Types of Preference** | **Description** |
| None | Employee has no veterans’ preference. |
| 5-point | Employee has a 5-point veterans’ preference. |
| 10-point disability | Employee has a 10-point veterans’ preference due to disability. |
| 10-point/compensable | Employee is entitled to a 10-point preference due to a compensable service-connected disability of less than 30%. |
| 10-point other | Persons entitled to a 10-point preference in this category: (1) Both the Spouse and mother of veterans occupationally disabled because of a service-connected disability, and (2) the widow/widower and mother of a deceased wartime veteran. |
| 10-point/30% compensable | Veteran is entitled to 10-point preference due to a compensable service-connected disability or 30% or more. |
| No Points/Sole Survivorship Preference (SSP) | Veteran is not entitled to preference. |