

YourName

Write here SOP.



CONTACT ME

Email Id (First Mentioned -> Personal or College)
Contact Number : +91 (Must Include)
LinkedIn QR Code & Git Hub (Must to have)
Address (City , State)

EDUCATION

Degree & Diploma & School qualifications
For ex: -> Bachelor of Science & B.Tech & Diploma
Major: [Your major or field of study]
College/University: [Name of the college or university where you earned your degree]
Location: [City, State/Province, Country]
Graduation Year: [Year of graduation]

EXTRA CURRICULAR

Activity Title: [Activity Title]
Organization/Club: [Name of the organization or club where the activity took place].
Position/Role: [Your position or role in the activity, if applicable]
Duration: [Start and end dates of your involvement in the activity]
Description: [Briefly describe your responsibilities, achievements, or contributions in the activity]

LANGUAGES

Language: [Language Name]
Proficiency Level: [Your proficiency level - e.g., Fluent, Advanced, Intermediate, Basic]
Certification: [Any relevant certification or qualification, if applicable]
Experience: [Briefly describe your experience or usage of the language, if applicable]
For Example: German/French/English e.t.c

Point's to be Noted:

- Add achievements if any.
- Add position or responsibilities if any.

@SAMISKHA TIWARI

INTERNSHIPS

Company Name | Location (Remote/Virtual)

2019 - 2022

Company Name
Role- Must Mention
Date- Joining & Ending
Technology - Must Mention
(Also Mention some related Project's) -> That will be a plus point

TRAINING

Company Name | Location

Title: [Title of the training program or certification]
Issuing Organization: [Name of the organization that issued the training or certification]
Date of Completion: [Date when you completed the training or received the certification]
Description: [Briefly describe the content, skills, or knowledge gained through the training or certification]

Add related tools and technologies in which u are worked in.

PROJECT'S

Project Title: [Project Title]
Project Description: [Brief description of the project, including its objectives, scope, and key outcomes] Project
Duration: [Start and end dates of the project]
Project Role: [Your role in the project, such as team member, project lead]

- Do mention the link for each project.

CERTIFICATES

Certification Title: [Certification Title]
Issuing Organization: [Name of the organization that issued the certification]
Date Earned: [Date when you earned the certification]
Credential ID: [If applicable, include the credential ID or number associated with the certification]

CO CURRICULAR

Activity Title: [Activity Title]
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Company Name
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@SAMISKHA TIWARI

YOUR NAME

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Extra Curricular

Activity Title: [Activity Title] Organization/Club: [Name of the organization or club where the activity took place]
Position/Role: [Your position or role in the activity, if applicable] Duration: [Start and end dates of your involvement in the activity] Description: [Briefly describe your responsibilities, achievements, or contributions in the activity]

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