## FAS.P.ON SITE

## Curriculum Vitae

FAS.P

Personal information NAME Name SURNAME Surname DATE OF BIRTH dd/mm/yyyy PLACE OF BIRTH City CITIZENSHIP Citizienship Contact information ADDRESS Address, City, State, Zip TELEPHONE +12 34 567890 CELL PHONE +12 345 67890 E-MAIL EMAIL 1;	РНОТО
EMAIL 2 DATE Month year - Month year DETAILS Details	Education
DATE <b>Month year - Month year</b> DETAILS <b>Details</b>	
DATE ( <b>Month year - Month year)</b> DETAILS <b>Details</b>	
MOTHER TONGUE <b>Mother tongue</b> SECOND LANGUAGE <b>Second language (level);</b> THIRD LANGUAGE <b>Third language (level); Cert</b>	
WHERE City, State	Erasmus programme

PERIOD dd/mm/yyyy - dd/mm/yyyy