## **FIRST NAME: OPTIONAL:** If possible place a photo of you here. **LAST NAME:** PHONE NUMBER: E-MAIL: ABOUT MYSELF SKILLS EXAMPEL Welding of special materials, drivers licence LANGUAGE SKILLS **ENGLISH NONE YET** GERMAN **NONE YET**

**IMPORTANT:** You don't have any language certificates yet? No

YOUR ADDRESS: WORK EXPERIENCES EXAMPEL COMPANY NAME May - August 2013 - 2014 Head of department Kuala Lumpur EDUCATION **EXAMPEL** NAME OF THE SCHOOL Kuala Lumpur CERTIFICATES, DIPLOMAS & DEGREES YEAR OF ISSUE 2011 - 2012 NAME OF THE CERTIFICATE, DIPLOMA OR DEGREE

DO YOU NEED HELP?

CONTACT US NOW!