

**COLLEGE OF EDUCATION
STUDENT COUNCIL ELECTION 2026
CURRICULUM VITAE**

PERSONAL INFORMATION

Name		CLSU Email	
Age		Contact	
College		Number	
Degree Program			

Position Applying for: _____

Under the (Political Party)(n/a if none): _____

EDUCATION

	School Attended	Inclusive Dates	Honor Received
Elementary			
Junior High School			
Senior High School			

SKILLS

EXPERIENCES (Extra-Curricular Activities/Community Involvement)

Inclusive Date (Month/Year)	Organization Name	Position Held	Scope (University/Local)

TRAINING(S) ATTENDED

Date	Name of Seminar(s)/Training(s) Attended

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Signature over Printed Name