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Last Name

First Name

M. Initial

CMU Global ID

CMU Grad Date:		LEVEL: Fr So Jr Sr Grad Alumni <i>(circle one)</i>				Campus ID # Note: this is no longer your social security number!	
Current E-mail Address <i>(print legible)</i> :		Are you a teaching candidate: <input type="checkbox"/> Yes <input type="checkbox"/> No					
		Student Teaching:    Spring    Fall <i>(circle one)</i> Year: _____					
ADDRESS <i>[current]</i> :				(                    )			
Street		City		State		Zip Code	
						Area Code            Phone Number <i>[current]</i>	
ADDRESS <i>[permanent]</i> :				(                    )			
Street		City		State		Zip Code	
						Area Code            Phone Number <i>[permanent]</i>	
<p><i>Under the Family Educational Rights and Privacy Act of 1974, I hereby authorize Career Services to release my materials to any bona fide employer or graduate school interested in my qualifications as an employee or graduate student. I do, however, reserve the right to cancel this authorization at any time by written notice to Career Services.</i></p>							
SIGNATURE:					DATE:		
*** FOR OFFICE USE ONLY ***							
Date Received:		Effective Date:		Bulletin Slip Completed:            _____ Yes                    _____ No			
<i>[revised 01/07]</i>		Return completed card to: CMU Career Services * 215 Bovee University Center * Mt. Pleasant, MI 48859 or fax to: 989-774-6608					