



CREDENTIAL FILE REGISTRATION FORM

Name _____

Permanent Address _____
(street address)

_____ (city) (state) (zip)

Telephone Number _____ Social Security Number _____

BA/BS _____ (major) (graduation date)

MA/MS _____ (concentration) (graduation date)

NYS Certification(s) _____ (subject area) (grade level) (completion date)

_____ (subject area) (grade level) (completion date)

In order to release your recommendation materials to prospective employers or graduate schools, Public Law 93-380 requires that we obtain your permission in writing to do so, and that you also indicate the recipients and purposes for release. To meet this requirement, complete the Consent for Release of Records portion below. If this portion is not signed, you will need to contact us in writing each time you want the file sent.

In order to assist me in securing either employment or acceptance into graduate school, I hereby authorize the Career Services Office at Nazareth College of Rochester to disclose the recommendation materials and/or credentials contained in my Nazareth College Credential File, to all prospective employers or graduate schools, **except** those listed below:

I understand that this authorization can only be revoked in writing and that such revocation shall not apply to materials which have been disclosed prior to the date of such revocation. I release the Career Services Office staff and Nazareth College of Rochester from any liability to me for consequences arising from authorized disclosure.

Signature _____ Date Signed _____