

University of South Florida Career Center
RESUME RELEASE FORM

(Please Print)
LAST NAME: _____

Anticipated Graduation Semester & Year: 5 (spring) 8 (summer) 12 (fall) Year 20 _____

Please check your current status:

Student (\$10 one-time activation fee)

- Are you seeking a degree from USF? YES NO
 - Do you currently have a Federal Work Study award from Financial Aid? YES NO
- Note: FWS students may request the \$10 be waived to view only FWS jobs. FWS award letter must be presented when requesting the FWS waiver.

Alumni (included in \$50 Career Center Alumni Services fee)

I hereby authorize the USF Career Center to disclose to direct hiring organizations my profile information and resume, for the purpose of assisting me in securing employment.

1. I hereby authorize the USF Career Center to release my profile information and resume to all prospective employers YES NO
2. My citizenship status: (check the one that applies to you)
 US Citizen US Permanent Resident
 Non-Citizen: F-1 Visa H-1 Visa J-1 Visa Employment Authorization (Category _____)

I understand that in order to nullify the authorization of my resume release, I must do so in writing. Such nullification shall not apply to information from records which have been disclosed to hiring organizations and/or their recruiters prior to the date of nullification.

I further attest that the data provided on my profile information and resume is a true and accurate statement of my qualifications.

***PLEASE NOTE: Your profile information section must be completed and your resume uploaded in Career Connections within eight (8) days. If this is not completed within 8 days, the system will automatically de-activate your account.**

Your signature constitutes agreement to comply with the above terms.

Name (please print) U.S.F. Identification Number

Name (signature) Date

Phone Number (_____) _____

E-mail address (please print legibly): _____

IMPORTANT: If you are a CO-OP applicant the above e-mail address MUST be supplied by USF

For Office Use Only: Student (\$10) Alumni (\$50)

I.D. Checked Receipt # _____ Sale Date _____ Time _____

Expiration Date (Alumni Only) _____ Staff Initials _____