



## Career Development Services Registration

NAME: \_\_\_\_\_

Student ID: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

GRADUATION DATE: \_\_\_\_\_

THE CAREER SERVICES OFFICE MAY SEND COPIES OF MY RESUMES TO PROSPECTIVE EMPLOYERS

YES \_\_\_\_\_ NO \_\_\_\_\_

I AM WILLING TO RELOCATE YES \_\_\_\_\_ NO \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_

WORK PHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

**Please attach your resume and return to the Career Development Services Office.**

I AUTHORIZE THE CAREER DEVELOPMENT SERVICES OFFICE TO ACT ON MY BEHALF IN THE SOLICITATION OF EMPLOYMENT AND THE DIVULGENCE OF THE INFORMATION ON THIS DOCUMENT AND ANY SUBSEQUENT INFORMATION THAT THE CAREER SERVICES OFFICE DEEMS TO RELEASE.

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

P.O. Box 65, Clarkesville, GA 30523 \* PH: 706-754-7700 \* FAX: 706-754-7777  
121 Meeks Avenue, Blairsville, GA 30512 \* PH: 706-439-6300 \* FAX: 706-439-6301  
8989 GA Hwy 17, Toccoa, GA 30577 \* PH: 706-779-8100 \* FAX: 706-779-8130

[www.northgatech.edu](http://www.northgatech.edu)

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5/1/2014