

**DISCLOSURE CONSENT FORM**  
University of Mary Washington, Office of Career Services

To assist me in securing employment or in securing admission to graduate school, I hereby authorize the Office of Career Services, to release the following information.

- { } Unofficial Academic Transcript -  
**You must request that the Registrar's Office send your transcript to Career Services**
- { } Recommendations
- { } SAT scores -  
**You must send a copy or original of these to Career Services**
- { } Unofficial PRAXIS Scores -  
**You must send a copy or original of these to Career Services**

I understand that I must request, in writing, that my credential file be sent to prospective employers or graduate schools. In some cases the employer or graduate school may request Career Services to send my credential file to them. Therefore, I authorize disclosure of the above information to the following:

- { } Prospective employers, and their bonafide representatives, who request the above information from the Office of Career Services when they are considering my application for employment.
- { } Graduate and professional school representatives who may request the above information from the Office of Career Services for the purpose of evaluating my candidacy for admission.
- { } **Permission is granted to FAX and/or scan my credentials.**

I specifically withhold consent for disclosure of any information to the following parties:

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Name (please print) \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ SS Number (last four digits) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Date of Graduation \_\_\_\_\_ Phone Number \_\_\_\_\_