

Portland Community College  
Student Employment & Cooperative Education Services  
Rock Creek Campus

## Student & Graduate Employment Services Application

Date \_\_\_/\_\_\_/\_\_\_ Program/Major \_\_\_\_\_ Student ID # \_\_\_\_\_

AAS    Certificate    Transfer \_\_\_\_\_ Anticipated Date of PCC Completion \_\_\_\_\_

Name \_\_\_\_\_ E-Mail \_\_\_\_\_  
Last First

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Are you authorized to work in the United States?    Yes    No

What services interest you?

Resume Writing Assistance

Cooperative Work Experience

Job Referrals

Job Finding Skills

Interview Preparation

Other \_\_\_\_\_

Please read the following statement and sign below.

Portland Community College shall follow applicable state and federal laws, rules and regulations that apply to student records. All information contained in the college records which is personally identifiable to any student shall be kept confidential and not released except upon prior written consent of the student or upon the lawful subpoena or other order of a court of competent jurisdiction.

Pursuant to my employment search, I hereby authorize Portland Community College to release confidential information about me contained in the college records or documents on file in the Student Employment and Cooperative Education Services Office to all potential employers. PCC cannot release job-related information to potential employers without this signed form.

**REQUIRED SIGNATURE** \_\_\_\_\_ **Date** \_\_\_\_\_

### OFFICE USE ONLY

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