



Hart Career Center  
Recruitment and Credentials Registration Form

Name: \_\_\_\_\_  
(Last, First Middle)

Campus Address: \_\_\_\_\_  
\_\_\_\_\_

Campus Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Permanent Phone: \_\_\_\_\_

Major: \_\_\_\_\_ Month/Year of Graduation \_\_\_\_\_

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**(FOR STAFF USE ONLY)**

Written Recommendations on file:

Recommender	Date Received	
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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I authorize the Illinois Wesleyan University Hart Career Center to release information contained on this form, my resume, and/or in my credentials file to representatives of graduate/professional schools or prospective employers with whom on-campus interviews are scheduled. Prior written consent will not be required but is limited to those organizations in which I have identified an interest as evidenced by my signing-up for preselection or interview appointments.

I assume the responsibility of providing accurate information in all my written and verbal presentations with recruiting organizations. I have read, understand and will honor the "Procedures for Using the Hart Career Center." Likewise, I will refrain from any practice that is not in accordance with the National Association of Colleges and Employers' Principles for Professional Conduct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_