

**CAREER SERVICES OFFICE
MADONNA UNIVERSITY
PERMISSION STATEMENT**

To the Teacher Candidate:

Please read the following carefully and return to the Career Services Office. We will not establish a file for you until this form has been completed and filed with the Office. If you have questions, contact the Career Services Office.

Name (Please Print) _____ ID Number _____

Sign and date

I request that an open NON-CONFIDENTIAL credential file be established for me. This means that I have personal access to my file. Also, that I am obligated to inform persons from whom I am requesting references that I do have such access.

Signature _____ Date _____

Sign and date

PERMISSION FOR RELEASE OF CREDENTIAL FILE

The Career Services Office staff has my permission to release the contents of my credential file to prospective employers, expressing interest in my qualifications.

Signature _____ Date _____