

**POLYTECHNIC UNIVERSITY OF PUERTO RICO
Career & Internship Services Program**

LEGAL CONSENT TO DISCLOSE INFORMATION

I understand that under the ***Family Education Rights and Privacy Act of 1974 (FERPA)***, Polytechnic University of Puerto Rico may not disclose personally identifiable information from my education record to third parties without my signed written consent. I also understand that I can revoke this consent at any time with written and signed revocation.

For the purpose of furthering its efforts to assist me in finding employment,

I hereby authorize the Director and Staff of the Career & Internship Services Program at Polytechnic University of Puerto Rico to disclose by mail, fax, Internet, email, or any other means, my resume/credential file and any other information contained in its files that relates to me to any employing organization **except** the following:

I hereby authorize the Director and Staff of the Career & Internship Services Program at Polytechnic University of Puerto Rico to disclose by mail, fax, Internet, email, or any other means, my resume/credential file and any other information contained in its files that relates to me **only** to the employing organizations listed below:

I authorize the Director and Staff of the Career & Internship Services Program at Polytechnic University of Puerto Rico to disclose by mail, fax, Internet, email, or any other means, my resume/credential file and any other files related to me to third **party recruiters who may, in turn, forwarded my resume to interested employers.**

I hereby authorize the Director and Staff of the Career & Internship Services Program at Polytechnic University of Puerto Rico to include my resume into the Office's data base and **to transmit (electronically or otherwise) this information as part of the data base to employing organizations.**

Signature _____

Date _____

Polytechnic University of Puerto Rico does not discriminate in any manner contrary to law or justice on the basis of race, color, gender, sexual orientation, age, religion, disability, veteran's status or national origin in its educational programs or activities, including employment and admissions

REVOCAION OF CONSENT TO DISCLOSE INFORMATION

I revoke my consent to disclose my resume/credential file and any other information contained in the Career & Internship Services Program files or data base.

Signature _____

Date _____