

ALUMNI INFORMATION FORM
NATIONAL AMERICAN UNIVERSITY

NAME _____ Date _____

Social Security Number _____ Maiden Name _____

Spouse's Name _____ Is spouse NAU grad? Yes _____ No _____ Year _____

Address _____ City _____ State _____ Zip Code _____

Telephone Number (_____) _____ - _____ E-mail _____

◆ **CAMPUS** _____

◆ **DEGREE** Diploma _____ Major _____ Grad. Date _____

Associate _____ Major _____ Grad. Date _____

Bachelor _____ Major _____ Grad. Date _____

Education other than at NAU _____

Organization & Activity Involvement at NAU _____

◆ **IMPORTANT** Who is someone (parent, friend, relative, etc.) who will always know where to contact you?

Name _____

Address _____ City _____ State _____ Zip Code _____

Telephone Number (_____) _____ - _____ E-mail _____

Relationship to You _____

◆ **CURRENT EMPLOYMENT INFORMATION**

Job Title _____ Name of Employer _____

Address _____ City _____ State _____ Zip Code _____

Telephone Number (_____) _____ - _____ E-mail _____

Will you be seeking another position upon graduation? _____ Yes _____ No

◆ **RELEASE INFORMATION**

Yes _____ No _____ Please release to potential employers information they might request including resumes and references.

Yes _____ No _____ My resume and cover letter may be used as samples when assisting NAU students in the development of their job search materials.

Yes _____ No _____ My name and telephone number may be shared with individual NAU students or NAU alumni for the purpose of networking and assisting students with informational interviews, etc.

Yes _____ No _____ My name and place of employment may be shared with NAU students and staff for publication in a student newsletter.

I understand that NAU has an obligation to report employment statistics for accreditation purposes. I also understand that an NAU staffperson will be contacting me upon graduation to learn my employment status and provide job search assistance if I request that assistance.

SIGNATURE _____ **DATE** _____