

Reference Waiver Form

Please complete the information below.	
Name	
Student ID Number	
Address	
City	
State	
Telephone Number	
Alternate Telephone Number	
College Email Address (cannot be used after you graduate)	
Personal Email Address	

I waive my right to read references submitted to the Center for Job Placement at CT State Naugatuck Valley on my behalf. I understand that this document must be signed by me in person in the presence Center for Job Placement staff and that I must present a valid government issued photo ID, which will be copied and stored with this document in my file. I further understand that all requests for letters of reference or other documents to be sent to employers on my behalf must be signed and that only an original signature, not a faxed or scanned signature, will be accepted. Center for Job Placement staff will compare the signature on this document with the signature on all request forms. If there is any question about whether the signature matches, you will be required to deliver the request in person, presenting a valid government issued photo ID or you may mail a request, signed and sealed by the notary public along with a copy of a valid government issued photo ID, sealed by a notary public.

Student Signature

Date

CJPCO Staff Only			
Received by		Date	
<input type="checkbox"/> Copy of Photo ID Attached			